

# RAM LAL ANAND COLLEGE, NEW DELHI

## Leave Application Form

1. Name of the Applicant.....
2. Post held ..... Section/Deptt. ....
3. Leave applied for (No. of days) ..... From ..... To .....
4. Nature of leave applied for .....
5. Ground on which leave is applied for .....
6. Details of Sundays and / or holidays, if any, proposed to be prefixed/ suffixed to leave to be availed .....
7. Address during leave (if proceeding out of station) .....
8. I propose / do not propose to avail myself of leave travel concession for the block year ..... during the ensuing leave.
9. Certified that this is the minimum period of leave required by me.

Date .....

.....  
Signature of the Applicant

**(For Non-Teaching Staff)**

**(For Teaching Staff)**

Leave Recommended

Leave Sanctioned

Leave Sanctioned

**Section Head**

**Admn. Officer**

**PRINCIPAL**

Remarks, if any

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### To be filled by the Administration Office

Adjustment of leave done :

Title of leave

No. of days & dates

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Leave adjustment approved

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*Sr. Assistant / Assistant*

*S.O. (Admn.)*

*Admn. Officer*