FORM OF APPLICATION FOR CHILD CARE LEAVE

1.	Name of applicant & Post held	
2.	Section	
3.	Pay & Grade Pay	
4.	Name of Child with Date of Birth: First: Second:	
5. allowa	House rent allowance, conveyance or other compensatory: ances, drawn in the present post.	
6.	Period of leave applied for:	
7. prefix	Sundays and holidays, if any proposed to be: ed/suffixed to leave	
8.	Ground on which leave is applied for	
9. Conce	I propose/do not propost to avail myself of leave travel: ession for the block years	
10.	Date of return from last CCL:	
Date:		Signature of Applicant
11.	Remarks and recommendation of the Controlling Officer.	
Date:		Signature Designation
Order	r of the Sanctioning Authority	
Date:		Signature Designation