

## APPLICATION FOR CHILD CARE LEAVE

1. Name of the Applicant : \_\_\_\_\_
2. Designation : \_\_\_\_\_
3. Dept/Office/Section : \_\_\_\_\_
4. Name of Child for whom Child  
Care leave is applied for : \_\_\_\_\_
5. Date of Birth of the Child : \_\_\_\_\_
6. Date on which child will be attaining  
18 years. : \_\_\_\_\_
7. Is the child among the two eldest Children : Yes/No
8. EL in credit (as on date) : \_\_\_\_\_
9. Period of Leave \_\_\_\_\_ Days : From \_\_\_\_\_ To \_\_\_\_\_  
Prefix/Suffix of holidays, if any : \_\_\_\_\_
10. Reason(s) for leave applied for : \_\_\_\_\_
11. Total Child Care Leave availed till date : \_\_\_\_\_
12. (a) Whether permission to leave : Yes/No  
station is required  
(b) If Yes, Address during leave period : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
13. Date of return from last leave, : \_\_\_\_\_  
& nature and period of that leave \_\_\_\_\_

Date : \_\_\_\_\_

**Signature of applicant**

Pay Card No. \_\_\_\_\_

### Remarks of Controlling Officer

Leave Recommended / Leave Not Recommended.

Date : \_\_\_\_\_

Signature : \_\_\_\_\_

Designation : \_\_\_\_\_

Office : \_\_\_\_\_