REGIONAL CENTRE FOR BIOTECHNOLOGY

(NCR BSC, Faridabad-Gurgaon Expressway, Faridabad)

APPLICATION FOR LEAVE

1.	Name (In Block Letters)				
2.	Designation				
3.	LAB/Deptt				
4.	Basic Pay	Rs.			
5.	Nature of Leave	(Casual/Ear	ned/Half Pay Leave	/RH/Commuted Le	ave/Other)
6.	Period of Leave	From	To	(No. of Days	s)
7.	Ground on which leave is applied				
8.	Leave Address				
9.	I propose/do not propose to avail Myself of LTC for the block year	Yes	No_ (If yes, LTC for	Year m may be enclosed	l)
10.	I request forDays Encashment of leave with LTC	Yes	Nc	<u>, </u>	
Date Signature of Applicant					
Rer	marks by Recommending/Forwarding Author	rity			
Dat	e			S	Signature
		STRATION DE E REG. ADMI	EPARTMENT SSIBILITY OF LEAV	'E	
Cer	tified that (No. of	days of CL/EL/	HPL/RH/ and LTC (Block Year) is
due	as per leave/office records and encashmen	nt of	days leave	may kindly be sanc	tioned.
	Com at:	anad/Nat S		ion Officer/Adn	nin Officer
Sanctioned/Not Sanctioned					

Registrar/Manager

Executive Director/ Competent Authority