

LEAVE APPLICATION FOR TRAINEE

Name of Trainee: _____

Information about leave:

| | From | To |
|-------------|-------------|-----------|
| Leave Dates | | |
| Prefix | | |
| Suffix | | |

Reasons for Leave: _____

Address During Leave: _____

Contact No. During Leave: _____

Alternate arrangement of duties during leave:

| DATE | NAME OF TRAINEE WHO WILL BE ON DUTY DURING YOUR LEAVE PERIOD |
|-------------|---|
| | |
| | |
| | |

Balance of Leave (in Days): _____

Signature of the Trainee

FOR OFFICE USE

Recommended / NOT recommended for leave. Alternate arrangement has been done/ NOT done.

If NOT recommended, give reasons: _____

Other Remarks : _____

Signature of JTS/TS

No. of Leave Sanctioned (in Days): _____

Balance of Leave in Days: _____