

**OFFICE OF THE PRINCIPAL DIRECTOR OF AUDIT (CENTRAL),  
BENGALURU**  
**APPLICATION FOR CASUAL LEAVE AND RESTRICTED HOLIDAYS**

NAME :	
DESIGNATION :	
SECTION :	
DATE FOR WHICH CL/RH REQUIRED :	
REASON :	
BALANCE OF CL/RH :	

SIGNATURE OF THE OFFICIAL

DATE \_\_\_/\_\_\_/20\_\_

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