

## **FORM OF APPLICATION FOR LEAVE**

### **(SEE SUPPLEMENTARY RULE 216)**

Note:- Items 1 to 12 must be filled in by all applicants whether gazetted or non-gazetted.

1. Name of applicant :	
2. Leave Rules applicable :	
3. Post held :	
4. Department : Office : Section :	Indian Audit & Accounts Department Principal Director of Audit (Central), Bengaluru
5. Pay :	
6. House Rent allowance, conveyance allowance or other compensatory allowance drawn in the present post :	As applicable
7. Nature and period of leave applied for and date from which required :	
8. Sundays and Holidays if any proposed to be prefixed/ suffixed to leave :	
9. Ground on which leave is applied for :	
10. Date of return from last leave and the nature & period of that leave :	
11. Address during Leave Period :	
<b>12.</b> I propose/ do not propose to avail myself along with my family of leave travel concession in the block years.....during the ensuing leave.	
<b>13.</b> I undertake to refund the difference between the leave salary drawn during leave on average pay/ commuted leave and that admissible during leave on half average pay/ half pay leave, which would not have been admissible had the provision to F.R 81 (b) (ii) /rule 11 (c) (iii) of the Revised Leave Rules, 1933 not been applied in the event of my retirement from service at the end of during the currency of the leave.	
<b>14.</b> I undertake to refund the leave salary drawn during leave not due which would not have been admissible and F. R.81(c) /Rule 11 (d) of Revised Leave Rules, 1933 not been applied, in the event of my voluntary retirement or resignation from service at any time or until I earn half pay leave not less than the amount of leave not due availed of by me.	
Date:	Signature of the Applicant

15. Remarks and/or recommendation of the Controlling Officer.

Date:

Signature : .....

Designation : .....

**Certificate Regarding Admissibility of Leave**  
(By Account General in the case of Gazetted Officers)

16. Certified that.....(Nature of leave) for .....days from \_\_\_\_/\_\_\_\_/20\_\_\_\_  
to \_\_\_\_/\_\_\_\_/20\_\_\_\_ is admissible under rule .....of the .....Rules.

Date:

Signature: .....

Designation: .....

15. \*Orders of the sanctioning authority :

Date:

Signature: .....

Designation: .....

\*If the applicant is drawing any compensatory allowance, the sanctioning authority should state whether on the expiry of leave he is likely to return to the same post or to another post carrying a similar allowance.

