

APPLICATION FOR CHILD CARE LEAVE

1. Name of the Applicant	:									
2. Designation	:									
3. Dept/Office/Section	:									
4. Detail of Child/Children	:	<table style="width: 100%; border: none;"> <tr> <td style="width: 60%;">Name</td> <td style="width: 40%;">Date of birth</td> </tr> <tr> <td>-----</td> <td></td> </tr> <tr> <td>-----</td> <td></td> </tr> <tr> <td>-----</td> <td></td> </tr> </table>	Name	Date of birth	-----		-----		-----	
Name	Date of birth									

5. Name of Specially abled Child	:									
6. Name of Child for whom Child Care leave is applied for	:									
7. Date of Birth of the Child	:									
8. Date on which child will be attaining age of 18 years.	:									
9. Is the child among the two eldest Children	:	Yes/No								
10. Period of Leave & Number of Days Prefix/Suffix of holidays, if any	:	From _____ To _____ Days _____								
11. Reason(s) for leave applied for	:									
12. Total Child Care Leave availed till date	:									
13. (a) Whether permission to leave station is required	:	Yes/No								
(b) If Yes, Address during leave period	:	Yes/No								
14. Date of return from last leave, & nature and period of that leave	:									

Date : _____

Signature of applicant
Employee ID No.

Leave Sanctioning Authority

Remarks of Controlling Officer Leave Recommended / Leave Not Recommended.

Date : _____ Signature _____

Designation _____ Office _____

Baf