

MAHATMA GANDHI UNIVERSITY, KOTTAYAM

Form No. 13

APPLICATION FOR LEAVE

(See Rule 113, Part I)

Note :- Items 1 to 14 must be filled in by all applicants whether gazetted or non-gazetted.

1. (a) Name of the applicant in Capital Letters :
(b) Name of the applicant (in Malayalam) :
2. Date of Birth :
3. (a) Post held :
(b) Employee's ID No. (PF No.) :
4. (a) Department, Office and Section :
(b) Mobile No. & Intercom No. :
5. Pay and scale of pay :
6. Date of entry in service :
7. Date of commencement of continuous service :
8. Address during leave :
9. House rent allowance, conveyance allowance or other compensatory allowance drawn in the present post :
10. (a) Nature of leave applied for :
(b) Period of leave applied for :
(c) Date from which the leave is required :
11. Holidays, if any, proposed to be prefixed/suffixed to the said leave :
12. Purpose for which the leave is applied for :
13. (a) Date of return from last leave (other than causal leave) :
(b) Nature and period of last leave (other than causal leave) :
14. I undertake to refund the leave salary drawn during 'leave not due' which would not have been admissible had rule 85, Part I Kerala Service Rules not been applied in the event of my voluntary retirement or resignation from service at any time until I earn, half pay leave not less than the amount of leave not due availed of by me.

Place :
Date :

Signature of applicant (with date)

(P.T.O.)

APPLICATION FOR LEAVE

(See Rule 113, Part I)

15.(a) Remarks or recommendation of the immediate Supervisory Officer :

Signature (with date)
Designation

(b) Remarks or recommendation of the Controlling Officer.

Signature (with date)
Designation

CERTIFICATE REGARDING ADMISSIBILITY OF LEAVE
(By Audit in the case of Gazetted Officers)

16. "Certified that.....(nature of leave) for
.....from.....to.....
is admissible under rule.....of Kerala Service Rules".

Signature (with date)
Designation

17. * Orders of the sanctioning authority. :

Signature (with date)
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.

Signature of applicant (with date)

JOINING REPORT

Joining Report of Shri/Smt.....

..... working as.....

in the University Office, Priyadarsini Hills, rejoining duty after
Earned/Half Pay/Commuted/Extra Ordinary Leave from.....

..... to..... Sanctioned vide

..... dtd.....

I report myself for duty today (date.....)
fore-noon/after-noon.

Signature :

Countersigned by:

SECTION OFFICER

ASST. REGISTRAR/DY. REGISTRAR

FOR OFFICE USE