APPLICATION FOR CHILD CARE LEAVE

1	Name of the Applicant	
2	Designation	
3	Dept/Office/Section	
4	Detail of Child/Children	
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	
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	-
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: _____