

**APPLICATION FOR CHILD CARE LEAVE**

1. Name of the Applicant : .....
2. Designation : .....
3. Deptt./Office/Section : .....
4. Name of Child for whom Child Care Leave is applied for : .....
5. Date of Birth of the Child : .....
6. Date of which child will be attaining 18 years : .....
7. Is the child among the two eldest Children : Yes/No
8. EL in credit (as on date) : .....
9. Period of Leave - .....days : From.....to.....  
Prefix/suffix or holidays, if any : .....
10. Reason(s) for leave applied for : .....
11. Total Child Care Leave availed till date:.....
12. (a) Whether permission to leave Station is required Yes/No  
(b) If Yes, Address during the Leave period : .....
13. Date of return from last leave & nature and period of that leave : .....

Signature of applicant  
Pay Card No.....

**Remarks of Controlling Officer**

Leave Recommended/Leave Not Recommended

Date:.....

Signature.....  
Designation .....  
Office.....