

TAMIL NADU ELECTRICITY BOARD

Leave application of Class I and II Officers (on by the applicant)

1. Name of Officer :
2. Employee No. :
3. Designation :
4. Office :
5. Nature of leave required (Tick appropriate box) :
Earned Leave
Surrender Leave
Un-Earned Leave on Medical Certificate
Un-Earned Leave on Private Affairs
Extraordinary Leave
Special disability Leave
Study Leave
Maternity Leave
6. Period of leave required : Year Months Days
From To
7. Reasons for Leave :
8. Whether Medical Certificate is enclosed (Tick appropriate box) : Yes No
9. I Certify that I will continue to incur the expenditure, for which C.C.A. & H.R.A. are granted During the above period also. :
10. Other Certificates (if any) :
11. Leave address to which communications are to be sent :
12. Designation and Office of immediate authority :
13. Designation and Office of sanctioning Authority :

SIGNATURE OF APPLICANT
DATE:

FOR USE IN OFFICE

- I. Recommendation of immediate Authority :
- i) Whether substitute is required :
 - ii) Whether additional charge arrangement is recommended :
- II. If additional charge arrangement is recommenced :
- i) Name of Officer to held additional charge :
 - ii) Employee Number :
 - iii) Post held on Regular charge :
 - iv) Job No. :
- III. Recommendation of the authority Maintaining SR of applicant :
- i) Leave at credit before sanction : Year Months Days
 - ii) Period of Leave applied for : Year Months Days
 - iii) Balance of leave at credit if leave applied is to be sanctioned. : Year Months Days