



राष्ट्रीय प्रौद्योगिकी संस्थान मिजोरम
NATIONAL INSTITUTE OF TECHNOLOGY MIZORAM
CHALTLANG, AIZAWL: MIZORAM - 796012
(FORM)
(See Rule 14)

APPLICATION FOR LEAVE OR EXTENSION OF LEAVE FOR LTC

1. Name of applicant : _____
2. Post held : _____
3. Department/Office/Section : _____
4. Pay : _____
5. House rent & other compensatory : _____
allowances drawn in the previous year
6. Nature of leave : _____
7. Period applied for : _____
8. Date : From. _____ to _____
9. Sundays and holidays : _____
if any proposed to be prefixed/
suffixed to leave _____
10. Grounds on which leave is applied for : _____
11. Date of return from last leave, and the : _____
nature and period of that leave
12. I proposed / do not proposed to avail myself of Leave Travel Concession for the Block
years _____ to _____ during the ensuing leave.
13. Address during leave period : _____

Dated _____

Signature of Applicant

11. Remarks and/ or recommendation of
the controlling officer

Signature of Controlling Officer
(With date)

CERTIFICATE REGARDING ADMISSIBILITY OF LEAVE

12. Certified that..... (Nature of leave) for.....(Period)
from.....to.....as admissible under Rule.....of the Central Civil
Services (Leave) Rules, 1972.

Signature of the Controlling Officer
(With date)

13. Orders of the authority competent to grant leave.

Registrar / Director