

## All India Institute of Medical Sciences, Bhubaneswar Sijua, Post: Dumuduma, Bhubaneswar - 751 019

1. Name	of the applicant	:		
2. Post I	Held	:		
3. Depai	rtment/Office and Section	:		
	re of Leave EL/HPL/EOL/CCI			<b>-</b>
Date tron	n which required	:rr	om	_ 10
	d of Leave applied for Holidays if any Prefix/			
Suffixed	to leave :Prefix		Suffix	
6. Grour	nd on which leave is applied	:		
	ess during Leave Period with e Number	:		
	of return from last leave and ture and period of that leave			
	oose/do not propose to avail during the e			concession in this block
on av	ertake to refund the differ erage pay/commuted leave o pay leave, which would not h	and	admissible during l	eave on half average pay/

from service at the end or during the currency of the leave.

•	y time until I earn half	•	nt or resignation from the amount of leave not
Date :	Designation	Signature	
Ē	RECOMMENDATION BY	THE CONTROLLING	AUTHORITY
Reco	mmended/Not Recommo	ended	
(By F	RTIFICATE REGARDII Pr. Accountant General	in the case of gazett	OF LEAVE red officers)
12. Certified	that	(Nature	of Leave) for
is admissible	under rule	of the	(period) (Rules)
		Signa Desig	iture nation
13. Orders of th	ne sanctioning authority	:	
		Signa Desig	iture nation
<ul> <li>If the appropriate</li> </ul>	olicant drawing any com	pensatory allowance, tl	he 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.

11. I undertake to refund the leave salary drawn during leave not due which would not have been admissible had F.R 81(c) /Rule 11 (d) of the Revised Leave Rules 1933