

Leave Taking Form

1. Name _____
2. Position _____
3. Number of Days Requested _____
4. Dates: From _____ to _____
5. Purpose _____
6. Destination _____
7. Type of Leave _____
8. Number of total leave days availed in the current year _____

Vice-Principal
(Forwarding office for faculty only)

Principal
(Granting Office)

(To be filled in by Office)

1. Number of days taken (***Please refer to BTC Service Rule V, p. 27 for permissible leave days***):
 - (i) Casual Leave _____
 - (ii) Sick Leave _____
 - (iii) Earned Leave _____
 - (iv) Special Leave _____
2. Total number of ***earned leave*** days remaining _____
(Encashable upto 100 days maximum in the entire service span)

(Signature of Accountant)

Date _____