नैनो विज्ञान एवं प्रौद्योगिकी संस्थान
(विज्ञान एवं प्रौद्योगिकी विभाग, भारत सरकार का एक स्वायत्त संस्थान)
Institute of Nano Science and Technology
(An Autonomous Institute of Department of Science and Technology, Govt. of India)

Form No.6 (a)

LEAVE APPLICATION FORM
(For Earned / Half Pay / Commuted / Maternity / Paternity / Child Care Leave)

1.	Name of the employee	
2.	Designation	
3.	Nature of leave applied for [EL/HPL/CML/ML/PL/CCL]	
4.	Period of leave	From : To:
5.	Total Number of days	
6.	Holidays prefixed to leave	
7.	Holidays suffixed to leave	
8.	Grounds on which leave has been applied for	
9.	Date of return from previous leave (except CL & RH) and nature & period of that leave	Date :_____ Nature of Leave :_____ Period: From _____ to _____
10.	Station Leave Permission required : If yes, indicate the address and contract number during station leave period	Yes / No

Date: **Signature of Applicant**

FOR OFFICE USE ONLY

Nature of Leave : _____ Leave in credit as on _____: _____ Days **Dealing Hand**	Recommended /Not recommended **Officer In-Charge** **(Group Coordinator / HoO)**	Leave Approved / Not Approved **HoO / Director**