

**FORM-I**

[See Rule 8]

**Application for leave or for extension of leave.  
(For use by the Government servant applying for leave)**

- 1. Name of the Applicant : .....
- 2. Designation : .....
- 3. Department : .....
- 4. Nature and period of leave applied for with date : .....
- 5. Sunday's and holidays, if any, proposed to be prefixed or suffixed to leave : .....  
: .....
- 6. Grounds on which leave is applied for : .....
- 7. Date of return from last leave : .....
- 8. Whether Medical Certificate is enclosed in case the leave is on medical ground : .....
- 9. Address during leave period : .....  
: .....  
: .....

Submitted for sanction.

.....  
(Signature of the Applicant) with date

To,

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(FOR USE BY THE SANCTIONING/RECOMMENDING AUTHORITY)

Signature (with date and designation)