

From

The Director General,  
Technical Education Department,  
Haryana, Panchkula

To

The Principal;

1. Principal, Govt. Polytechnic, Ambala City/Nilokheri/Sonepat/Jhajjar/Narnaul  
Hisar/ Adampur/Sirsa
2. Principal, KC. Govt. Polytechnic for Women, Ambala City /Faridabad/Sirsa

Memo.No. 1861-71


/Estt. I

Dated, Panchkula the:- 4/4/13

**Subject: Proformas for Child Care Leave, Earned Leave & Extra Ordinary Leave.**

In this connection it is observed that the proposals for granting CCL, EL & Extra ordinary leaves to the staff are being received in the Directorate office without any detailed required information under the relevant rules and clear recommendations of the Principal concerned. It is, therefore, requested that the proposals for granting Child Care Leave, Earned Leave & Extra Ordinary Leave to the staff working under your kind control may kindly be sent to Directorate office alongwith detailed requisite information and clear cut recommendations in proforma enclosed. No proposal for the grant of above leave shall be entertained by this office without proforma.

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**Joint Director(Admn.),  
For Director General Technical Education,  
Haryana, Panchkula**



## CHILD CARE LEAVE APPLICATION

**Note :** As per F.D. instructions dated 5.7.12, no CCL shall be granted during probation period and CCL should be got sanctioned in advance and under no circumstances leave already availed or period of unauthorized absence shall be converted into CCL retrospectively. Further, intention of allowing CCL is to facilitate the women Govt. employees to take care of their children at the time of need but it does not mean that CCL should disrupt the functioning of the offices/institutions and CCL cannot be demanded as matter of right.

### **A) TO BE FILLED UP BY THE APPLICANT**

1 Name of Institute / Polytechnic \_\_\_\_\_

2 Details of Applicant:

Name of Applicant	Post held & Pay Scale	Date of joining the Service on regular basis as such	Date of completion of Probation period

3 Detail of two eldest surviving children (copy of birth certificates duly attested by the Principal concerned, be attached)

Sr.No.	Name of Child	D.O.B.	Age	Male/Female
1				
2				

4 Period of CCL required: \_\_\_\_\_

5 Name of child for whom, CCL is required. \_\_\_\_\_

6 No. of CCL availed in present calendar year alongwith period \_\_\_\_\_

7 No. of total CCL availed till date \_\_\_\_\_

8 Purpose of Care(rearing,examination,sickness ) as mentioned in F.D. instructions dated 5.7.12) \_\_\_\_\_

9 Address during the leave alongwith contact No. \_\_\_\_\_

I undertake to refund the amount if paid in excess than the admissible leave salary.

Dated: \_\_\_\_\_

Full signature of the applicant

10 Recommendation of the In-charge concerned. \_\_\_\_\_

Signature of Incharge

### **B) TO BE FILLED UP BY THE OFFICE OF PRINCIPAL**

11 Diary No./Date of receipt of application in the office of Principal \_\_\_\_\_

12 Number of balance E.L. of the applicant as on date \_\_\_\_\_

13 Details of CCL:

Total CCL admissible	CCL already availed (alongwith spellwise period)	Date of return from last CCL	Balance amount of CCL	Period of CCL recommended
Two years (730 days)				

14 Proposal of Principal (Recommended or not) \_\_\_\_\_

The recommendations have been given strictly in pursuance of FD instructions No. 11/102/2009 dated 5.7.2012 & CCL account of the applicant has been maintained(copy enclosed).

Full signature of Principal (with seal)



## EARNED LEAVE / EXTRA ORDINARY LEAVE APPLICATION

A) TO BE FILLED UP BY THE APPLICANT

1. Name of Institute/ Polytechnic \_\_\_\_\_
2. Details of Applicant :

Name of Applicant	Post held	Pay Scale	Date of joining the Service

3. Nature of Leave required (EL/EOL) \_\_\_\_\_
4. Period of leave required \_\_\_\_\_
5. Rule of CSR Vol.I Part-I applicable \_\_\_\_\_
6. Sunday & holidays, if any proposed \_\_\_\_\_  
To be prefixed/suffixed to leave.
7. Ground on which leave is applied for \_\_\_\_\_  
(If EOL are required for study purpose  
The permission of competent authority  
may be attached).
8. Date of return from last leave \_\_\_\_\_
9. Address during the leave \_\_\_\_\_  
alongwith contact No. \_\_\_\_\_

I undertake to refund the amount if paid in excess than the admissible leave salary. My retirement is not due at the end of or during the currency of the leave.

Dated:

Full signature of the applicant

10. Recommendations of the  
In-charge concerned

Signature of Incharge

### B) TO BE FILLED UP BY THE OFFICE OF PRINCIPAL

- 10 Diary No. /date of receipt of application \_\_\_\_\_  
in the office of Principal.

- 11 In case of EL:

EL already availed	Date of return from last EL availed	Balance amount of EL	Period of recommended. EL

12. In case of EOL, period of leave recommended \_\_\_\_\_

13. Proposal of Principal (recommended or not) \_\_\_\_\_