

APPLICATION FOR LEAVE NOT DUE

To

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Reg: Grant of leave not due.

Sir,

I was on prolonged sickness since _____ and I have availed all leave on full and half average pay which was at my credit. I am in great distress, because I am on leave without pay. I have come to know that no assistance from staff benefit fund is due to me. I, therefore, request you to kindly grant me "Leave Not Due" for _____ days which is the leave that can be sanctioned in advance and adjusted after resumption. I am covered by C.P.C. leave rules. I clearly understand that I am liable to refund all the money received on account of leave not due in case of leave service on my own accord during the currency "LEAVE NOT DUE."

Yours faithfully.

Signature with name & Designation.
Station of working.

CERTIFICATE FROM MEDICAL AUTHORITY.

Certified that I have examined Shri/Smt. _____ employed under _____ as _____ who is under treatment since _____ and I am of the opinion that there is every reasonable chance of his recovery and earning leave on his resumption. I, therefore, recommend "Leave not due" for _____ days on his case or I, therefore, do not recommend "Leave not due" in his case and instead I recommend grant of assistance from staff benefit fund as per extent rules.

Dated:

Signature.