



AGRICULTURE UNIVERSITY, JODHPUR

Form of Application for Privilege Leave/Commutated leave/LWP/EOL/HPL under the Rajasthan Service Rules

- (1) Name of applicant :
- (2) Designation and place of posting :
- (3) Department/Section/Office:
- (4) Basic pay or Pay band with grade pay :
- (5) Nature and period of leave applied :
- (6) Date and duration from which it is required :
- (7) Sunday/holiday, if any, prefixed or suffixed :
- (8) Leave address in case applicant leaves the Head Quarters:
- (9) Grounds on which leave is applied:
- (10) (a) Date of return from last leave:
- (b) Nature and period of that leave:

I undertake to refund the difference between leave salary drawn during PL/Commutated leave/ HPL which is not admissible/ not due in event of retirement/ resignation.

Signature of applicant with designation & date

- (11) Remarks and recommendation of controlling officer:
- Name of person who will look-after the duty of the applicant:

Signature with designation of Controlling Officer

- (12) Comments of the Concerned Dean/Director (if applicable):

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Signature and seal of Dean/Director

Certificate regarding admissibility of leave

Certified that.....(Nature of Leave) for(Period)
fromto.....is admissible under the rules of Rajasthan Service Rules.
He/she is entitled for.....days P.L. /Comm. Leave/H.P.L. upto

Dealing Asstt/SO

Granted

Sanctioning Officer