



NATIONAL LAW UNIVERSITY DELHI

Sector- 14, Dwarka, New Delhi – 110078

Application Form for Child Care Leave (Faculty/Administration)

1. Name of the Applicant : _____
2. Post held : _____
3. Department/ Office / Section : _____
4. Name of Child for whom Child Care Leave applied for : _____
5. Date of Birth of the Child : _____
6. Date on which child will be attaining 18 years : _____
7. Is the child among the two eldest Children : YES/ NO
8. E.L. in credit (as on date) : _____
9. Period of Leave -Days : from _____ to _____
10. Sunday and holiday, if any proposed to be Prefixed/Suffixed to Leave : _____
11. Reason(s) for Leave applied for : _____
12. Total Child Care Leave sanctioned till date : _____
13. (a) Whether permission to leave Station is required : YES/ NO
- (b) If Yes, Address during the leave period : _____
14. Date of return from last leave, & nature and period of that leave : _____
15. Name of the person who will attend work during leave : _____

Signature of Applicant with Date
Contact No. _____

Remarks of Branch In-charge/Head of Office

Certified that the department work will not suffer in CCL Period. Therefore, her leave is recommended / OR Not recommended

Signature of Section /Department Head

(For Office Use Only)

Type of Leave Applied for _____
Leave Due _____
Leave Applied (No. of Days) _____
Balance of Leave _____
Total no of occasion for which leave applied during the year _____
Orders of the authority competent to grant leave Sanctioned/Not Sanctioned

Signature of Competent Authority