

Satyawati College (Evening)

(University of Delhi)
Ashok Vihar: Delhi - 110052

APPLICATION FOR ENCASHMENT OF LEAVE FOR LTC FOR THE BLOCK YEAR: 20__ - 20

Name of the Employee : _____
Designation : _____
Encashment applied for (No. of days) : _____
Nature and period of leave applied for/granted : _____
EL balance at credit (will be filled up by the office): _____

I have applied separately for the permission to avail LTC. I request that 10 days encashment of Leave may also be allowed as per the rules.

Date: _____ Signature: _____

FOR ADMN. SECTION

Particulars verified and necessary entries have been made in the Leave Record on Page Number: _____ and in the Leave Encashment Register on Page Number: _____. May be allowed.

Dealing Assistant Date: _____ Section Officer (Admn.)

FOR ACCOUNTS SECTION

As per records, he/she is presently drawing - Basic Pay: _____, Grade Pay: _____ and DA: _____

Amount admissible for encashment of ___ days leave: Rs. _____

May be sanctioned.

Dealing Assistant Section Officer (Accounts) Administrative Officer

APPROVED

PRINCIPAL