

CHANDIGARH ADMINISTRATION
POLICE DEPARTMENT

APPLICATION FOR CHILD CARE LEAVE

1.	Rank, Name & No.																					
2.	Place of Posting																					
3.	Mobile Number	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">9</td> <td style="width: 20px; text-align: center;">1</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table>	9	1																		
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4.	Date of appointment																					
5.	Total No. of Children																					
6.	Date of birth of surviving Children	(1)DOB _____ (2)DOB _____ (3)DOB _____																				
7.	No. of days and period of CCL applied now	Days_____ From_____ to _____																				
8.	No. of days & Dates of leave, if earlier availed	(i) Days_____ From_____ to _____ (ii)Days_____ From_____ to _____																				
9.	Reason for leave (Attach exam date sheet) (Attach Medical Certificate)	<input type="checkbox"/> For Examinations of child <input type="checkbox"/> for child care on medical grounds																				
10.	Whether any DE/ Criminal case is pending/Contemplated	YES <input type="checkbox"/> NO <input type="checkbox"/>																				
11.	Whether applicant is a probationer (under three years)	YES <input type="checkbox"/> NO <input type="checkbox"/>																				
12.	Whether Exam Datesheet/ Medical Certificate is attached	YES <input type="checkbox"/> NO <input type="checkbox"/>																				
13.	Address while on leave																					

Certified that the above information is correct and leave applied is not for 3rd child.

It is further certified that spell of leave applied is not more than 3 times during calendar year.

Signature of Applicant

Forwarded & recommended. Applicant is not habitual absentee nor under suspension.

GO/ASP/DSP

Forwarded/recommended/ sanctioned

DIG/SSP/SP

Dy Director(Admn)