



राष्ट्रीय प्रौद्योगिकी संस्थान दिल्ली
NATIONAL INSTITUTE OF TECHNOLOGY DELHI

APPLICATION FOR LEAVE TRAVEL CONCESSION

1.	Name of the Employee with Employee Code							
2.	Designation and Department							
3.	Date of entering the Central Government Service/Date of Joining with NIT Delhi							
4.	Band Pay + AGP/GP							
5.	Leave required	Nature : _____ From _____ To _____ Prefix _____ & Suffix _____						
6.	Whether spouse is employed, if yes whether entitled to LTC	Yes / No						
7.	Proposed dates of Journey	Outward Inward Self: Family:						
8.	Home Town as recorded in the Service Book							
9.	Nature of LTC to be availed, Home Town/Anywhere in India with Block Year							
10.	If, anywhere in India, the place to be visited							
11.	Estimated fare of entitled class from the headquarter to Home Town/Place of visit by shortest route (proof need to be attached).							
12.	Details of Previous LTC Availed (Hometown/Anywhere In India)							
13.	Person(s) in respect of whom LTC is proposed to be availed.							
	S No.	Name	Age	Relationship	Travelling (Place)			Mode of Travel
					From	To	Back (Yes/No)	
	i.							
	ii.							
	iii.							
	iv.							
	v.							
	vii.							
	viii.							
	ix.							
	x.							
14.	Advance Required?				Yes / No			
15.	Encashment of earned leave required?				Yes/No	If Yes, _____ Days		

I undertake:

- a) To produce the tickets for the journey within ten days of receipt of the advance.
- b) To refund the entire advance in lump sum, in the event of cancellation of the journey within two months from the date of drawl of the advance or failure to produce the tickets within 10 days of drawl the advance.
- c) To travel by Air/Rail/Road as per my entitlement and as per GOI LTC rules or specific rules as adopted by the Institute.
- d) To refund the excess advance drawn, if any, within 7 working days of completion of the journey.
- e) To submit necessary bills, money receipts and other documents* as required under the Rules and Regulations of the Institute within one month (where advance is drawn) / three months (where no advance is drawn), from the date of completion of the journey.

I will communicate to the competent authority about any change of declared place of visit or change of dates before the commencement of the journey.

** Please note that, in case of e-tickets, Boarding Passes are to be submitted while settling LTC claim.*

Certified that:-

1. The information, as given above is true to the best of my knowledge and belief; and
2. My spouse is not employed in Government service / my spouse is employed in government service and the concession has not been availed of by him/her separately of himself/herself or for any of the family members for the _____ block year.

Signature of the Applicant with date

Head/Coordinator/Section In-charge

FOR USE OF ESTABLISHMENT SECTION

Date of joining: _____ Block Year: _____

1. LAST AVAILED LTC PARTICULARS/DETAILS IN CURRENT BLOCK YEAR:

01	Nature of LTC (Home Town/Anywhere in India)	
02	Period of LTC	
03	LTC for Self/Family or Both	

2. DETAILS OF CURRENT LTC APPLIED:

01	Nature of LTC (Home Town/Anywhere in India - Place to be visited)																													
02	Period of LTC																													
03	LTC for Self/Family or Both																													
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vi.																														
04	Earned leave encashment applied (Yes/No)	No. of Days: _____																												
05	Advance Applied? (Yes/No)	Estimated Amount: _____																												
06	Period and nature of leave applied for and needs to be sanctioned	Type of Leave : _____ Period of : _____ Leave : _____ No. of Days : _____																												
07	Earned Leave standing to his credit on current date:	_____ Days																												
	Balance Earned leave encashment, if applied (S. No. 4) + Earned Leave, if applied (S. No. 6): _____ Days <i>(should not be less than 30 days)</i>	_____ Days																												
	Earned Leave encashment admissible	_____ Days																												

Additional Remarks, if any:

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Dealing Assistant

Superintendent (E)

Assistant Registrar

Recommended & Forwarded for Audit

Approved/Not Approved

Registrar

Director

FOR USE IN ACCOUNTS SECTION (For Audit and Advance Disbursement)

FROM	TO	MODE OF TRAVEL	NO. OF FARES	SINGLE FARE	AMOUNT

Total Rs. _____

Advance admissible (90% of above) = Rs. _____ Passed for Rs. _____

(in words); Rupees _____

Debitable to LTC advance Dr./Mr./Mrs./Ms. _____

VOUCHER NO.....DATED.....

Pay Rupees.....

Vide Cheque No.....dated.....

Dealing Assistant

Superintendent (Accounts)

Faculty In charge (A/c)

Registrar

Director

Accounts Section

Establishment Section

**FOR USE BY THE ESTABLISHMENT SECTION
(for Office Order and Necessary entries in Service book)**

Certified that necessary entries have been made in the Service Book of Sh./Ms/Dr. _____

Dealing Assistant

Superintendent

Assistant Registrar
(Signature of the officer authorized
to attest entries in the Service Book)

Registrar