

# राष्ट्रीय प्रौद्योगिकी संस्थान दिल्ली NATIONAL INSTITUTE OF TECHNOLOGY DELHI

|     |  | APPLICA   | TION   | FOR LEAVE TRA                              | VEL CONCE   | ESSION     |                  |         |  |
|-----|--|---|--------|--|---|------------|------------------|---------|--|
| 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   | l Pay + AGP/GP  |        |  |   |            |                  |         |  |
| 5.  | Leave required   |   |        | Nature : From To           Prefix & Suffix |   |            |                  |         |  |
| 6.  | Whether spouse is employed, if yes whether entitled  |   |        |  | & 3u1   |            | -                |         |  |
|     | to LTC   |   |        | Yes / No                                   |   |            |                  |         |  |
| 7.  | Proposed dates of Journey  |   |        |  | <u>Outward</u>  | <u>Inw</u> | ard              |         |  |
|     |  |   |        |  | 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 11 2 1 |            |                  |         |  |
| 11. | Estimated fare of entitled class from the headquarter to Home Town/Place of visit by shortest route (proof need to be attached). |   |        | 2  |   |            | 1                |         |  |
| 12. |  | Details of Previous LTC Availed<br>(Hometown/Anywhere In India) |        |  |   |            | ·                |         |  |
| 13. | Perso  | Person(s) in respect of whom LTC is proposed to be ava          |        |  |   | ailed.     |                  |         |  |
|     | S  | Name  | Age Re | Relationship                               | Travelling (Place)  |            |                  | Mode of |  |
|     | No.  |   |        |  | From  | То         | Back<br>(Yes/No) | Travel  |  |
|     | i.   |   |        |  |   |            |                  |         |  |
|     | ii.  |   |        |  |   |            |                  |         |  |
|     | iii.   |   |        |  |   |            |                  |         |  |
|     | iv.  |   |        |  |   |            |                  |         |  |
|     | v.   |   |        |  |   |            |                  |         |  |
|     | vii.   |   |        |  |   |            |                  |         |  |
|     | viii.  | 44.00   |        |  |   |            |                  |         |  |
|     | ix.  | ,   |        |  |   |            |                  |         |  |
|     | х.   |   |        |  |   |            |                  |         |  |
| 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                               |   |                            |               |     |  |  |  |
| 02   | (Home Town/Anywhere in India) Period of LTC |   |                            |               |     |  |  |  |
|  |   |   |                            |               |     |  |  |  |
| 03   | LTC for S                                   | Self/Family or Both   |                            |               |     |  |  |  |
| 2. DETAILS OF CURRENT LTC APPLIED:                             |   |   |                            |               |     |  |  |  |
| 01   | Nature o                                    |   |                            |               |     |  |  |  |
|  | (Home visited)                              | Town/Anywhere in India – Place to be  |                            |               |     |  |  |  |
| 02   | Period o                                    | fLTC  |                            |               |     |  |  |  |
| 03   | LTC for Self/Family or Both                 |   |                            |               |     |  |  |  |
|  | S No.                                       | Name  | Rel                        | ationship     | Age |  |  |  |
|  | i.  |   |                            |               |     |  |  |  |
|  | ii.   |   |                            |               |     |  |  |  |
|  | iii.  |   |                            |               |     |  |  |  |
|  | iv.   |   |                            |               |     |  |  |  |
|  | v.  |   |                            |               |     |  |  |  |
|  | vi.   |   |                            |               |     |  |  |  |
|  |   |   |                            |               |     |  |  |  |
| 04   | PP  |   |                            | No. of Days:  |     |  |  |  |
| 05   |   | Applied? (Yes/No)   |                            | mated Amount: |     |  |  |  |
| 06   | to be sar                                   | nd nature of leave applied for and needs nctioned   | Type of Leave<br>Period of | :             |     |  |  |  |
|  |   |   | Leave                      | :             |     |  |  |  |
|  |   |   | No. of Days                |               |     |  |  |  |
| 07   |   | Leave standing to his credit on current date<br>Earned leave encashment, if applied (S. No. |                            | Da            | ays |  |  |  |
|  | Leave, if                                   | applied (S. No. 6): Days  | 2011100                    | Da            | nys |  |  |  |
|  |   | not be less than 30 days)<br>Leave encashment admissible                                    |                            | Days          |     |  |  |  |
|  |   |   |                            | Da            | iyə |  |  |  |
| Add  | itional Re                                  | emarks, if any:   |                            |               |     |  |  |  |
|  |   |   |                            |               |     |  |  |  |
|  |   |   |                            |               |     |  |  |  |
|  |   |   |                            |               |     |  |  |  |
| Dealing Assistant Superintendent (E) Assistant Registrar       |   |   |                            |               |     |  |  |  |
| Recommended & Forwarded for Audit  Approved/Not Approved       |   |   |                            |               |     |  |  |  |
|  |   |   |                            |               |     |  |  |  |
|  |   |   |                            |               | 200 |  |  |  |

Registrar

Director

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

| FROM                   | ТО               | MODE OF TRAVEL            | NO. OF FARES              | SINGLE FARE | AMOUNT   |
|------------------------|------------------|---------------------------|---------------------------|-------------|----------|
|                        | <u>.</u> *       |                           |                           |             |          |
|                        |                  |                           |                           |             |          |
|                        |                  |                           |                           |             |          |
|                        |                  |                           |                           |             |          |
|                        |                  |                           | -                         | Total Rs    |          |
| Advance admissible     | (90% of above)   | = Rs                      | _ Passed for Rs           |             |          |
| (in words); Rupees_    |                  |                           |                           |             |          |
| Debitable to LTC adv   | ance Dr./Mr./M   | Irs./Ms                   |                           |             |          |
|                        |                  |                           |                           |             |          |
|                        |                  |                           |                           |             |          |
| Pay Rupees             |                  |                           |                           |             |          |
| Vide Cheque No         |                  | dated                     |                           |             |          |
|                        |                  |                           |                           |             |          |
| Dealing Assistant      |                  | Superintendent            | Superintendent (Accounts) |             |          |
| Registrar              |                  |                           |                           |             | Director |
| riogiouru.             |                  |                           |                           |             |          |
| Accounts Section       |                  |                           |                           |             |          |
| Establishment Sec      | ction            |                           |                           |             |          |
|                        |                  | OR USE BY THE ESTABL      |                           |             |          |
|                        | (for Offi        | ce Order and Necessary    | y entries in Servi        | се роок)    |          |
| Certified that necessa | ary entries have | e been made in the Servic | e Book of Sh./Ms          | /Dr         |          |

**Dealing Assistant** 

Superintendent

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