



अखिल भारतीय आयुर्विज्ञान संस्थान (एम्स) कल्याणी  
All India Institute of Medical Sciences (AIIMS) Kalyani

(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के तत्वावधान में एक सांविधिकनिकाय)

(A Statutory Body under the Aegis of Ministry of Health and Family Welfare, GOI)

राष्ट्रीय राजमार्ग - 34, बसन्तपुर, सागूना, कल्याणी, ज़िला - नदिया, पश्चिम बंगाल - 741245

NH-34 Connector, Basantapur, Saguna, Kalyani, District Nadia, West Bengal 741245

**Casual Leave (CL)/Restricted Holiday (RH) Application Form**

To

\_\_\_\_\_  
AIIMS, Kalyani

**Sub.:- Application for Casual Leave/ Restricted Holiday.**

Permission to leave HQ required: [Yes/no]: \_\_\_\_\_

**R/Sir,**

With due respect, I submit that I am unable to attend the office due to \_\_\_\_\_ from \_\_\_\_\_ to \_\_\_\_\_ for \_\_\_\_\_ days with permission to prefix \_\_\_\_\_ suffix

. Kindly grant casual leave/restricted holiday for the above mentioned period.

**Reliever's Name:** \_\_\_\_\_ **Designation:** \_\_\_\_\_ **Sign.** \_\_\_\_\_

**During above period, I shall be available in the following address (In case of leaving HQ):**

Mobile No. \_\_\_\_\_ Telephone No. \_\_\_\_\_

(Signature of Applicant)

Name of Applicant : \_\_\_\_\_

Designation : \_\_\_\_\_

Department : \_\_\_\_\_

**(Sanctioned/ Not Sanctioned)**

**HoD Dept. of** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**CL and RH Record**

Casual Leave				Restricted Holiday
CL 1	CL 2	CL 3	CL 4	RH 1
CL 5	CL 6	CL 7	CL 8	RH 2