

APPLICATION FOR CASUAL LEAVE

01 Name of the applicant :
02 Designation :
03 Name of the school :
04 Reason for seeking leave :
05 Date from which leave is sought :
06 Leave at credit :
07 Leave already availed :
08 Headquarter leaving permission :

Signature of the Applicant

OFFICE OF THE HEADMASTER, _____, _____,

BOIPARIGUDA BLOCK

L.No: _____

Date: _____

**Copy submitted to the Block Education Officer , Boipariguda for
favour of kind information and necessary action.**

Headmaster/Headmistress