



HR & Admin Department

Resource Integration Centre (RIC) Leave Application Form (LAF)

Total days Date of Joining: Leave Location Address: Leave Location Address: Mobile # (Emergency) To be Filled up by the HR & Admin/Concerned Officer-Area Type of Leave Available Deduct Balance Casual days days days Sick days days days Sick days days days Earned days days days Moternity days days days Special/ days days days Special/ days days days Leave Without Pay days Leave Without Pay days Special/ Balance Leave Without Pay days Leave Fine Ric Leave Fine Ric	rote of Employee: Leave Location Address: Leave Location Address: Leave Location Address: Mobile # (Emergency)	y Date:	Name:				Empl.# :		Designation	:
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Deputy Director/Head of Department

Director/Approver