

MAHATMA GANDHI CENTRAL UNIVERSITY BIHAR

[Established by an Act of Parliament]

TempCamp, Zila School Campus, Motihari - 845 401, District - East Champaran, Bihar

APPLICATION FORM FOR CHILD CARE LEAVE

| 1. | Name of the Employee | : | |
|-----|--|---|--|
| 2. | Designation | : | |
| 3. | Department / Office / Section | : | |
| 4. | Name of Child for whom Child Care leave is applied for | : | |
| 5. | Date of Birth of the Child (Attach proof) | : | |
| 6. | Date on which child will be attaining 18 Years | : | |
| 7. | Is the child among the two eldest Children | : | |
| 8. | Period of Leave - Days Prefix/Suffix of holidays, if any | : | |
| 9. | Reason(s) for leave applied for | : | |
| 10. | Total Child Care Leave availed till date | : | |
| 11. | Whether permission to leave Station is required | : | |
| | If Yes, Address during Leave period | : | |
| 12. | Date of return from last Leave & nature and period of that leave | : | |

Date:

Signature of Employee

Recommendation of the Head of the Department (HoD)

- 1. Certified that teaching and other work assigned to the applicant, will not be hampered during the above-mentioned period and the work-load will be shared by the others members within the department/section.
- 2. No. of teachers available in the Department during the above period:

Signature of the HoD

Date:

Signature

Recommendation of the Academic Coordinator / Concerned Authority

Date:

Signature

Observation(s) of the Establishment Section

Date:

Signature

Recommendation of the Registrar

Date:

Signature

Recommendation of the Hon'ble Vice-Chancellor

Approved / Not Approved