

MAHATMA GANDHI CENTRAL UNIVERSITY, BIHAR

[A Central University established by an Act of Parliament]
Dr Ambedkar Administrative Building, Raghunathpur, Motihari - 845 401, District - East Champaran, Bihar

Email: osdadmin@mgcub.ac.in

APPLICATION FOR LTC & LTC ADVANCE

| 1. | Name of the E | Employee | | : | | | | | | | |
|---|---|-------------------------------|----------------|--------------------------------|--------------------------------|-----|------------------------------|--------------------|--|--|--|
| 2. | Designation | | | : | | | | | | | |
| 3. | Pay in pay ma | itrix (as per 7 th | CPC) | : | | | | | | | |
| 4. | Department | | | : | | | | | | | |
| 5. | Date of appoi | : | | | | | | | | | |
| 6. | Place of home Service Book | etown as decla | ared in the | : | | | | | | | |
| 7. | Particular of l | LTC to be avai | led | : | | | | | | | |
| | i Previous I | Block Years LT | °C availed | : Hometow | : Hometown / Anywhere in India | | | | | | |
| j | ii Current Bl | ock Years LT(| C to be availe | ed : Hometow | : Hometown / Anywhere in India | | | | | | |
| 8. | Block year for | which now p | roposed to a | nvail : | ÷ | | | | | | |
| 9. | Nature and Po | eriod of leave | for which | : | : | | | | | | |
| | LTC proposed | l | | | | | | | | | |
| 10. | 10. Nearest Railway Station / Airport : for which LTC proposed | | | | | | | | | | |
| 11. | 11. Proposed date of onward journey : | | | | | | | | | | |
| 12. | Probable date | e of return jou | rney | : | | | | | | | |
| 13. | 13. Particulars of employee & his/her family members availing the facility: | | | | | | | | | | |
| | Sl. No. Name | | | Relationship with employee Age | | | Whether Dependent (Yes / No) | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| 14. Tour Plan : | | | | | | | | | | | |
| | ate of travelling From | | То | Mode of Travelling | Class of Accommodation | | Distance in km | Approx. Fair (Rs.) | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | indly attach the | | | | | | | | | | |
| | | | | gh any Govt. transpo | | | | | | | |
| 15. Total approximate cost of travel: Rs 16. Amount of Advance requested (90% of Sr. No. 15) | | | | | | | | | | | |
| | | - | - | • | | | | | | | |
| 17. | Whether spou | ıse is employe | ed and if so v | whether entitled to | LTC: YES | /NO | | | | | |

PERFORMA FOR SELF-CERTIFICATION BY THE CONCERNED EMPLOYEE

| [(Name of the employee) hereby declare that I am availing | | | | | | | | | | |
|--|--|-----------------------|-------------------------------------|--|--|--|--|--|--|--|
| (Home Town/Any Place in India) LTC in respect of self/family member(s) for t | | | | | | | | | | |
| | lock year to visit (Place to be visited) duringdate of journey). It is stated that I or the family member whom I wish to avail LTC has/have not availed of the | | | | | | | | | |
| | | nber wnom I wish to a | avail LTC has/have not availed of t | | | | | | | |
| same before in t | the present block. | | | | | | | | | |
| Particulars of fa | articulars of family members in respect of whom the Leave Travel Concession is being claimed are as under | | | | | | | | | |
| SI | Name(s) | Age | Relationship with the employee | | | | | | | |
| No. | Traine(3) | rige | netationship with the employee | | | | | | | |
| 1. | | | | | | | | | | |
| 2. | | | | | | | | | | |
| 3. | | | | | | | | | | |
| 4. | | | | | | | | | | |
| 5. | | | | | | | | | | |
| 6. | | | | | | | | | | |
| | | | | | | | | | | |
| • | above facts are true and any false sta LTC) Rules, 1988 and relevant discip | | e liable for appropriate action und | | | | | | | |
| | | : | Signature of the Employee | | | | | | | |
| Place | | 1 | Name | | | | | | | |
| Date | |] | Desig | | | | | | | |
| | |] | Dept | | | | | | | |
| | | | <u> </u> | | | | | | | |

^{*} N.B.: Employee may share interesting insight and picture, if any, of the destination visited while availing LTC on an appropriate forum.

DECLARATIN

| 1. | I hereby certify that above particulars furnished by me | | | | | | | | |
|--|---|--|--|--|--|--|--|--|--|
| | are true and correct | | | | | | | | |
| 2. | I also undertake to refund the LTC advance in full immediately in case of failure to perform the proposed journey for which advance has been taken | | | | | | | | |
| 3. | I also declare that I will not visit other than the place mentioned in application without obtaining prior approval of the competent authority. | | | | | | | | |
| 4. | I also agree to produce evidence of purchase of tickets, etc, for myself/members of my family as the case may be, for my forward journey within 10 days or before the commencement of the journey whichever is earlier from the date drawing the advance. I am aware that failure to comply with the above requirement will entail recovery of the advance in one lump sum from the next drawl of my salary, together with the penal interest @2% over and above the normal GPF interest. | | | | | | | | |
| 5. | I am aware that if do not submit LTC bills within one month (if advance taken) or three months (if advance not taken) from the date of return journey the outstanding LTC advance is recoverable in one lump sum from my next salary together with the penal interest @ 2% over and above normal GPF interest. | | | | | | | | |
| 6. | I am also aware that my claim will be forfeited if I fail to submit the bill within one month or three months as the case may be, from the date of completion of return journey. | | | | | | | | |
| 7. | That my spouse is not employed in government/that my spouse is employed in Government service and the concession has not been availed of by him/her separately for himself/herself or for any of the family members for the concern block of two years. | | | | | | | | |
| 8. | Certified that my wife/husband for whom LTC is claimed by me is employed in | | | | | | | | |
| | (Name of the | | | | | | | | |
| | Public Sector Undertaking/Corporate/Autonomous body etc.) which provides Leave Travel Concession facilities but | | | | | | | | |
| | he/she has not preferred and will not prefer, any claim in this behalf from his/her employer. | | | | | | | | |
| 9. Persons in respect of whom LTC is proposed to be availed are dependent on me. | | | | | | | | | |
| Signature of Forwarded through HOD/Section Head | | | | | | | | | |
| REMARKS OF THE ESTABLISHMENT SECTION | | | | | | | | | |
| | Details have been verified from the record and recommended / not recommended of LTC & LTC advance of | | | | | | | | |
| Rs(in words Rupees | | | | | | | | | |
| | | | | | | | | | |
| | Assistant Section Officer | | | | | | | | |
| | REMARKS OF THE REGISTRAR | | | | | | | | |
| | LTC sanctioned / not sanctioned and forwarded for release of LTC Advance sanctioned of Rs | | | | | | | | |
| | Date: Signature of the Registrar | | | | | | | | |