## Dr. RAJENDRA PRASAD CENTRAL AGRICULTURAL UNIVERSITY, PUSA SAMASTIPUR –848125 (BIHAR)

## $\frac{\text{APPLICATION FOR GRANT OF LEAVE TRAVEL CONCESSION ADVANCE /}{\text{LEAVE ENCASHMENT}}$

## (Incomplete form will not be accepted)

BLOCK YEAR

1.	Name of the Govt. S	ervan	t:				
2.	Designation :						
3.	Date of entering in the Central Govt. Service:						
4.	Present Pay Level and Pay:						
5.	Whether permanent or temporary						
6.	HOME TOWN as recorded in the Service Book :						
7.	Last LTC availed:-						
,.	East ETC availed.	(i)					
		(ii)	Visited Pla		n/ All India): _		
8.	Whether wife/ husband is employed  If so, whether entitled to LTC:						
9.	The concession is to be availed (Please ✓ and mention) For HOME TOWN/ANY WHERE IN INDIA :						
10.	The place to be visited :						
11.	Single Air fare /rail fare/ bus fare from the head Quarter to Home Town/ Place of visit by Shortest route:						
12.	Mode of Journey : _						
13.	Person in respect of mention below his/he		-	•	` •	oyee will have to	
Sl. No	o. Name		Age	Relationship	Married/ Unmarried	Dependent on employee or Not	
1.						1 0	
2.							
3.							
4.							
5.							
6.							
14.	Amount of advance	requir	ed : Rs				

15.	Earned Leave encashment required (Yes/ No.):							
	If Ye	s, please mention in days (Limited to Maximu	m 10 days)	:				
16.	Previous details of Leave Encashment in days :(Limited to maximum 60 days only in whole service period.)							
17.	Proposed date of outward Journey :							
18.	Date of return journey :							
19.	Whether leave sanctioned, nature & Period of Leave :							
20.	Whether any outstanding LTC bill against the Official:							
	me lia	lare that the particulars furnished above are able for appropriate action under Rule 16 of iplinary rules.		•				
	dvance.	ertake to produce the ticket for the outward journey. In the event of cancellation of the journey ays of receipt of advance, I undertake to refu	or if I fail	to produce the tickets				
conce	ssion h	ife is employed in (organization)as not been availed of by him/ her separately d block of years to	for any of					
Name								
Designation								
		Mob.N	No					
		CHECK LIST (FOR OFFICE USE ON	T.V)					
Partic	ular in	Columns 1 to 7 & 16 verified.	LI)					
			G. 0.G.1	0.00				
	D 1			of Controlling Officer				
1.	Break	x-up of the amount entitled for reimbursement						
			No of. tickets	Amount of Fare				
	(i)	Cost of the outward Journey						
	(ii)	Cost of the return journey						
	(iii)	Total of (i) & (ii) above: Rs.						
2.		Advance admissible (90%) of total of Col.1 above: Rs.						