

**APPLICATION FOR SANCTION of CHILD CARE LEAVE (CCL)
(In-service teacher)**

1	Name of the teacher & Designation	:	
2	Provident Account Number	:	
3	Name of the School with address	:	
4	DISE Code of School	:	
5	Circle Name	:	
6	Date of Birth	:	
7	Date of Joining	:	
8	Enrolment of School	:	
9	Total nos. of teachers including the applicant	:	
10	Particular of Leave:-		
	Total nos. of days of CCL availed previously	Balance of CCL at credit on the date of application	No of days enjoyed CCL[from-to]
			Purpose of leave(enclosed supporting documents)
			Date of joining after leave
			Name & age of child for whom CCL enjoyed (enclose age proof certificate)
I)	Name of child		
II)	No of days CCL enjoyed		
	From..... to.....		
	Remarks		

Signature HT/TIC with seal & Date

Signature of applicant with date

Memo No-

Date-

Forwarded to the Chairman/Secretary, DPSC, Burdwan.

Signature of the Sub-Inspector of Schools

Placed for consideration

May be considered

May be granted/ not granted

Dealing Assistant
DPSC, Burdwan

Section-in-Charge
DPSC, Burdwan

Assistant Inspector of School
DPSC, Burdwan

Memo No-

Date-

Granted/ not granted

Chairman/Secretary
DPSC, Burdwan