**FORM OF LEAVE ACCOUNT UNDER THE REVISED LEAVE RULES 1981**

**( Approved vide finance Division’s letter No.F.1(3).Rev.1/78 dated 18-1-1979)**

**Leave Account of Mr./Miss./Mrs.-------------------------------------------------------------------------------------------------- Date of commencement of service:-------------------------------------------**

**Date of attending the age of superannuation :-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Government/Department served under** | Period of Duty | **leave earned on full pay****(4 days for each calendar month)** | **Leave at credit ( columns+6)** | **LEAVE TAKEN** |
| **Period** | **leave on full pay without** **medical certificate to maximum** **of 120 days& 365 days in case of LPR** | **Leave on full pay medical certificate** **subject to a maximum of 180 days** | **Leave on full pay on medical certificate** **subject to a maximum of 365 days in****entire service** | **Leave on half pay** | **Recreation leave of 15 days in a** **year but 10 days to be debited** | **Leave not due** | **Absence** | **Total leave (columns)****(10+11+12+14+15+17+19)** | **Balance on 1-7-1987 return** **from leave (code7-20)** | **Ramarks** | **Attestation** |
| **In terms of half pay** | **in terms of full pay** | **In terms of half pay** | **Interms of full pay** | **Actual no. of days** | **No. of days debitable****double the actual number)** |
|  | **From** | **to** | **Y.M.D.** | **F.Yr.** | **Days** | **Days** | **From** | **To** | **Days** | **Days** | **Days** | **Days** | **Days** | **Days** | **Days** | **Days** | **Days** | **Days** | **Days** | **Days** | **Days** | **Days** |
| **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **13** | **14** | **15** | **16** | **17** | **18** | **19** | **20** | **21** | **22** | **23** |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |