FORM OF LEAVE ACCOUNT UNDER THE REVISED LEAVE RULES 1981

(Approved vide Finance Division's letter No.F.I. (3)-Rev.1/78, dated 18.1.1979)

Leave Account of Mr./Miss/Mrs. _____ Date of Commencement of service _____

Date of attaining age of superanuation _____

Government/Department served under	PERIOD OF DUTY				Leave earned on fully pay @ 4 days for each calendar month	Leave at credit (Column 21 + 6)	LEAVE TAKEN														Remarks	Attestation
							PERIOD		Leave on full pay without medical certificate to maximum of 120 days & 365 days in case of LPR	Leave on full pay on 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 (Column) (10+11+12+14+15+17+19)	Balance on return from leave (Cols 7-20)		
												In terms of half pay	In terms of full pay		In terms of half pay	In terms of full pay	Actual No. of days	No. of days debitable double the actual number				
	From	To	Days	F.Y.	Days	Days	From	To	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