

**INDIAN COUNCIL OF HISTORICAL RESEARCH**  
**35, Ferozeshah Road, New Delhi -110001**

**APPLICATION FOR CHILD CARE LEAVE**

1. Name of the Applicant : \_\_\_\_\_
2. Designation : \_\_\_\_\_
3. Department/Section : \_\_\_\_\_
4. Name of Child for whom Child Care leave is applied for : \_\_\_\_\_
5. Date of Birth of the Child : \_\_\_\_\_
6. Date on which child will be attaining 18/years. : \_\_\_\_\_
7. Is the child among the two eldest Children : Yes/No
8. EL in credit (as on date) : \_\_\_\_\_
9. Period of Leave-Days : From \_\_\_\_\_ to \_\_\_\_\_  
Prefix/Suffix of holidays, if any : \_\_\_\_\_
10. Reason (S) for leave applied till date : \_\_\_\_\_
11. Total Child Care Leave availed till date : \_\_\_\_\_
12. (a) Whether permission to leave station is required : Yes/No  
(b) If Yes, Address during leave period : \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
13. Date of return from last leave, & Nature and period of the leave : \_\_\_\_\_  
\_\_\_\_\_

Date : \_\_\_\_\_

Signature of applicant

**Remarks of Controlling Officer**

Leave Recommended/Leave Not Recommended.

Date: \_\_\_\_\_

Signature \_\_\_\_\_  
Designation \_\_\_\_\_