

## Application for sanction of Child Care Leave

**A.**

1. Name - Smt. ....
2. Designation - .....
3. Name of the School - .....
4. Circle - .....
5. Total Child Care Leave at her credit - .....
6. CCL already enjoyed ..... days
7. CCL applied from ..... to ..... = ..... days
8. No. of spell (Present Academic Calendar) - .....
9. Reason for CCL (Supporting documents to be attached) - .....
10. Name of Minor children for  
whom favoured Child care leave required .....
11. I am having ..... Nos. of children & ..... child (eldest) of mine  
against whom C.C.L. is applied.
12. Proof of date of birth - .....

(In favour of minor children availing child care leave)

**B.**

Note:-

- i) CCL is admissible to female teacher for a maximum period of 730 days for taking care of up to two children up to 18 years of their age for examination, illness etc.
- ii) Not to be granted more than three spells in a calendar year
- iii) Not to be granted for less than fifteen days in a spell.
- iv) Not ordinarily be granted during the probation period.
- v) Photocopy of documents / records to be enclosed with the prayer of CCL.
- vi) To be enjoyed only after obtaining prior permission from the competent authority.

**Dated -**

**Signature of the employee**

Forwarded to the Concerned S.I/S of ..... Circle for consideration of child care leave in favour of Smt. ....

**Date -**

**Signature of the HOI with Seal**

\*Received & accepted the application of child care leave in favour of Smt. ....  
..... from ..... to ..... & total ..... Nos. of days  
and forwarded for sanction to the competent authority.

**Date -**

**Signature of the competent authority with Seal**