



INDIAN INSTITUTE OF TECHNOLOGY KANPUR
प्रशासन अनुभाग
ADMINISTRATION SECTION

(To be submitted alongwith LTC req)

Form for encashment of Earned Leave alongwith LTC (H.T./Elsewhere)

Reference Ministry of Personnel, Public Grievances & Pension's Office Memorandum F. No. 31011/4/2008-Estt. (A) dated 23.09.2008.

In pursuance of the Office Memorandum under reference regarding encashment of EL while availing LTC (H.T./Elsewhere) in Lieu of HT). I request for the encashment of EL as per detailed appended below.

1. Name of the employee :
2. Personal File No. :
3. Designation :
4. Department/Section/Unit :
5. Current Block year of LTC :
6. Nature of LTC : Home Town/ Elsewhere/ In lieu of Home Town
7. No. of days encashment of EL required:
8. Details of leave taken for LTC :
 - (i) EL : From.....To.....
(excluding Prefix/Suffix)
 - (ii) CL : From.....To.....
(excluding Prefix/Suffix)
 - (iii) Other :From.....To.....
(excluding Prefix/Suffix)
9. No. of EL encashment earlier with LTC, if any:

Declaration

I fully understand the rules & regulations for availing encashment of Earned Leave with LTC (H.T./Elsewhere). If any discrepancy found in information given above or any excess payment made to me, I will be liable for the same and will refund the excess amount paid to me.

Signature of the applicant

Counter signed by the HOD/In-Charge

To be filled by the Administration Section

- Whether admissible for encashment of EL for LTC (Yes/No) :No. of Days.....
- Earlier encashment of No. of days of EL (out of 60) :
- Total encashment as on date out of 60 (including current request) :
- Balance of encashment of EL admissible :

Junior Assistant

Junior Superintendent

Deputy Registrar (Admin.)

Submitted for approval, please

Registrar

Deputy Registrar (F&A): for making necessary payment after submission of LTC claim subject to the approval by the Appropriate Authority.