

NATIONAL INSTITUTE OF TECHNOLOGY CALICUT

APPLICATION FORM FOR CHILD CARE LEAVE

Name :
Designation :
Department :
No. of Children, Name & Age :

Date of Birth of Children :
(Please produce age proof if not submitted earlier)

Reason for leave :
Period of leave :
Total No. of CCL already availed :
Which spell is applied presently : I / II/ III
Whether the child is Disabled/ Mentally Challenged : YES/ NO
(If Yes, please produce the certificate issued by Competent Authority)

Signature with Date

Recommended & Forwarded

HoD/ Sections

Dean (FW) (For Faculty only)

Sanctioned

Registrar

Note: 1. Requires prior sanction.
2. Intervening holidays will count as Child Care Leave as in the case of EL.
3. The leave may not be granted in more than 3 spells in a calendar year.