## V.O.CHIDAMBARANAR PORT TRUST

## \_\_\_\_\_ DEPARTMENT

Name & Employee No.	:	
Designation	:	
Nature of Leave applied for	:	
Period of Leave	:	
Permission of any	:	
Reason for the Leave	:	
Leave Address	:	
Previous CL availed	:	
		Signature
		Date
Recommended for sanction pl.		