

APPLICATION FOR GRANT OF TWO / FOUR YEAR BLOCK LTC / ALTC FOR THE YEAR TO

1. CISF No. _____ Rank _____ Name _____
2. Date of appointment in CISF _____ Coy _____
3. Date of joining in this Battalion _____
4. Period / Nature of leave applied for _____ w.e.f. _____
5. Details of Block year of which applied _____
6. Whether living with family in this Battalion _____
7. Have you availed any Railway warrant during the year _____
8. Have you availed LTC for All India Tour in _____
Block of 04 years, if so given details
9. Name of the Home Town _____
10. Name of the nearest Railway Station / Home Town _____
11. Distance between Railway Station to Home Town _____
12. Reason for availing _____
13. Persons in respect of whom LTC is _____
proposed to be availed

Sl.No	Name	Age	Male/Femal	Relationship

Signature of Applicant

Recommendation of Coy 2 I/C

He has been sanctioned _____ days EL / CL w.e.f. _____

Recommendation of Coy Commander

Signature of Coy 2 I/C

Signature of Asstt. / Dy. Commandant

To be filled by the Documents Section

- I) LTC / ALTC due / not due for the Year _____
- II) Home Town as per Service records _____
- III) Nearest Railway Station as per Service records _____

Signature of Dealing Clerk

Order of the competent authority

Sanctioned / Not Sanctioned

Signature of the Sanctioning authority

