



དཔལ་ལྷན་འབྲུག་གཞུང་། བསྟན་ཀླུ་ས་ལྷན་ཁག
 མི་རྒྱུ་ལས་ཁྲེའོ་ཚོན་ ཐིམ་ཕགྱུ།



HUMAN RESOURCE DIVISION
MINISTRY OF ECONOMIC AFFAIRS
ROYAL GOVERNMENT OF BHUTAN

Leave Application Form	
Employee Name	
Department/Division	
Name of Supervisor	
Type of Leave Requested (Please choose the relevant reason)	
1. Casual Leave	<input type="checkbox"/>
2. Earned Leave	<input type="checkbox"/>
3. Maternity / Paternity Leave	<input type="checkbox"/>
4. Medical Leave (ML)/Escort Leave (EsL)	<input type="checkbox"/>
5. Bereavement Leave	<input type="checkbox"/>
6. CE Exam Leave	<input type="checkbox"/>
7. Extra Ordinary Leave (EoL)	<input type="checkbox"/>
Note: Sl.No. 3 to 6 should be supported by necessary documents.	
Leave Applied	From : (d/m/y) _____ To : (d/m/y) _____, Day(s) _____
Reasons:	
Employee's Signature	Date :
Recommendation of HRO	
Certified that the employee has _____ day(s) _____ Leave balance as on ____/____/____.	
Signature of HRO (Official Seal)	Date:
Approval of the Department/Division Head	
<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved	
Signature	(Official Seal) Date:
For Official Use from Sl.No. 2 - 6 (Human Resource Division)	
MoEA/HRD- /201 /	Date:
Sanction is hereby accorded for _____ Leave with effect from ____/____/____ to ____/____/____ for _____ days.	
(Chief/Dy/HR Officer)	(Official Seal)
For Official Use for Sl.No. 4 & 7 (Human Resource Division)	
EOL/ML/EsL	Approved by MHRC Meeting No: _____ dated _____.
Note : ML beyond 1 month only.	