**DEPARTMENT OF CULTURE, MoHCA**

**Leave Request and Approval Form**

**Date: ………………..**

**To:** The Director General,

Department of Culture,

Thimphu.

**Kindly grant me leave as follows:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Sl.**  **No** | **Type of Leave** | **Select**  **to**  **Avail**  (√) | **Duration** | | | **Remarks** |
| **Start**  **Date** | **End**  **Date** | **Total** |  |
| 1 | Earned Leave |  |  |  |  |  |
| 2 | Casual Leave |  |  |  |  |  |
| 3 | Maternity Leave |  |  |  |  | Attach evidence |
| 4 | Paternity Leave |  |  |  |  | Attach evidence |
| 5 | Medical Leave |  |  |  |  | Attach evidence |
| 6 | Extraordinary Leave |  |  |  |  | Execute Legal Undertaking |
| 7 | Bereavement Leave |  |  |  |  |  |

**\* Submit reasons:**

……………………………………………………………………………………………………………….

**(Name & Signature of applicant)**

**Approved**

**Director General, DoC**

**Not Approved**