**ANNEXURE VII: LEAVE FORM FOR CABINET MINISTERS.**

|  |  |  |
| --- | --- | --- |
| **Sl. #** | **Particulars of Information** | **To be filled up by the proponent** |
| 1 | **Type of leave** *[Specify if the leave is**Earned, Casual, Maternity, Paternity,**Bereavement or Medical or others.]* |  |
| 2 | **Duration of Leave***[date from when to when and total number of days]* |  |
| 3 | **Place of Travel/Visit** *[Specify name of**place if out of station]* |  |
| 4 | **Purpose of Travel** *[Specify clearly]* |  |

**Submitted by: .....................................**

**Minister for .............................**

**Cabinet Secretary’s recommendations/remarks:**

**Approved/Not Approved**

**[By Prime Minister]**