

**PROTECTION OF PLANT VARIETIES & FARMERS' RIGHTS AUTHORITY**

**CASUAL LEAVE APPLICATION FORM**

1. Name of Applicant :
2. Designation :
3. Section :
4. No. of Days :
5. Date/Period :
6. Purpose :
7. In Station/ Out Station :

**Date:**

**Signature of Applicant**

**Recommendation of Controlling Officer**