



అఖిల భారత వైద్య విజ్ఞాన సంస్థ మంగళగిరి, ఆంధ్రప్రదేశ్
अखिल भारतीय आयुर्विज्ञान संस्थान, मंगलगिरि, आंध्रप्रदेश

All India Institute of Medical Sciences, Mangalagiri, Andhra Pradesh
(An Autonomous Institute under MoHFW, Govt. of India)

www.aiismangalagiri.edu.in

Application for Grant of Leave Travel Concession (L.T.C.) / L.T.C. Advance

1.	Name of the Government Servant	
2.	Designation	
3.	Employee Code No.	
4.	Telephone No.	
5.	Email address	
6.	Date of entering in the Central Government Service	
7.	Pay (Matrix & Basic Pay)	
8.	Whether Permanent or Temporary	
9.	a) Home Town as Recorded in Service Book	
	b) Nearest Railway Station	
10.	Whether wife / husband is employed & if so, whether entitled to L.T.C.	YES / NO
11.	Whether the concession is to be availed for visiting home town, and Block Year if so Block Year for which L.T.C. is to be availed.	YES / NO Block Year.....
12.	If the concession is to visit Anywhere in India, name the place to be visited and Block Year for which L.T.C. is to be availed.	
13.	Nature of Leave & Period (Enclose copy of Leave sanction order)	
	OR (Applicable in case of advance / LTC required for family members only)	
	Proposed date for onward journey	
	Proposed date of return journey	
14.	Single Rail / Bus Fare: from the Headquarter to Home Town / Place of visit by shortest route.	

Persons in respect of whom L.T.C. is proposed to be availed			
S. No.	Name	Age	Relationship
15.			
16.	Advance required, if so required Amount	Yes/No Amount Rs...	
17.	<p>i) I declare that the particulars furnished above are true and correct to the best of my knowledge, I undertake produce the tickets for the outward journey within ten days of receipt of advance. In the event of cancellation of the journey or if I fail to produce the tickets within 10 days of the receipt of the advance, I undertake to refund the entire advance in one lump sum.</p> <p>ii) That my husband/wife is not employed in govt. service/that my husband/wife is employed in govt. service and the concession has not been availed of by himself/herself or for any of the family member for the concerned block of years.</p>		
	Date: Place:	Signature of the Applicant Name of the Applicant:	

Proforma for self-certification by the Government employee

I,(Name of the Govt. servant & Post) wish to confirm that I am availing (Home Town/ Any Place in India) LTC in respect of self / **family member**(s) for the block year 2018-21 to Visit (Place of visit) during (outward journey) (dates of journey). It is stated that I or the family member for whom I wish to avail LTC has/have not availed of the same before in the present block.

2. Particulars of members of family in respect of whom the Leave Travel Concession is being claimed are as under:

S.No.	Name	Age	Relationship with the Government servant
1.			
2.			
3.			
4.			
5.			
6.			
7.			

3. It is certified that the above facts are true and any false statement shall make me liable for appropriate action under Rule 16 of CCS (LTC) Rules, 1988 and the relevant disciplinary rules.

(Signature of Govt. servant)

Name: _____

Designation: _____

Contact No.: _____

Date: _____

* N.B.: Government employee may share interesting insights and pictures, if any, of the destination visited while availing LTC on an appropriate forum.

CHECK LIST (Cash and Accounts Section)

1. Amount entitled for : Fare Rs.X 2 X (No. of tickets) Reimbursement
2. Advance admissible (90% of the amount i.e. Rs.)

Advance of Rs.
may be sanctioned.

Dealing Hand.

Signature of D.D.O.

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CHECK LIST FOR ADMINISTRATION

L.T.C. advance to _____

1. Block Year / Calendar Year :
 2. Home Town / A place anywhere in India :
 3. a) For whom advance is applied for :
b) Total number of persons :
 4. Specific grounds warranting sanction : for both/ onwards/ return journey of advance under Rule G.F. 235 (2) (iii) (a)
 5. Leave application received : Yes / No
Amount of
 6. advance : Rs.
 7. Temporary / Permanent :
 8. If temporary (Surety bond produced) : Yes / No
Necessary entry has been
made in the L.T.C. Advance Register.
- He/She is eligible for L.T.C. for the Block/Calendar Year