

From

Name :

PF Index :

Designation :

Branch :

To

The Branch Manager / Chief Manager / Assistant General Manager

State Bank of India

REQUEST FOR SANCTION OF SABBATICAL LEAVE FOR _____ DAYS

FROM _____ TO _____

1	Name of the employee	
2	PF Index	
3	Designation	
4	Branch/ Office	
5	Joined the Bank on	
6	Total service in the Bank	
7	Full Address with Pin Code for communication during Sabbatical Leave Period	
8	Contact No	
9	Email Id	
10	No of days Sabbatical Leave applied for - From Date to Date	

11	No of days Sabbatical Leave / ELOP availed so far, if any	
12	Brief Reasons for applying Sabbatical Leave	

13 Details of Loans & Advances O/s and other deduction as on date :				
Particulars of Loan	Account No	Limit	Amount Outstanding as on date	Amount of Monthly Installment

14 Loans and advances will be repaid by me from the following A/c during leave period

Type of A/c :

A/c No :

Branch Name :

Branch Code :

15 State Bank of India Employees Defined Contribution Pension Scheme (SBIEDCPS) will be contributed by me from the following A/c during leave period

Type of A/c :

A/c No :

Branch Name :

Branch Code :

You are hereby authorised to recover the installments or any amount due from me including other deductions from the above said account and I shall undertake not to withdraw the amount of provisioning to be made towards the liabilities as above

Further, I declare / undertake / confirm that :

(a)	I shall not overstay the sanctioned leave.
(b)	No disciplinary cases / Prosecution proceedings are pending against me.
(c)	I shall not accept / take up any employment / business / profession during the period of Sabbatical leave.
(d)	I am liable to be recalled for duty for any exigencies of service during the Sabbatical leave period.
(e)	I will be available for enquiry, court case/s if any, as and when summoned during the Sabbatical Leave period
(f)	There are no other loans / advances outstanding in my name except what is mentioned above in Point No (13)
(g)	I shall be liable for disciplinary action if information provided above is false / I overstay leave / I violate the terms and conditions stipulated under the sabbatical leave circular
(h)	I will arrange for payment of Income Tax, if any, falling due during the period of Sabbatical leave

I request you to sanction Sabbatical leave for _____ days
from _____ to _____

Yours faithfully

Place :

Date :