



ALL INDIA INSTITUTE OF MEDICAL SCIENCES DEOGHAR

(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान)

(An Institution of National Importance under Ministry of Health & Family Welfare)

भारत सरकार/ Government of India

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	YES / NO
	Block Year for which L.T.C. is to be availed	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.	



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15.	Persons in respect of whom L.T.C. is proposed to be availed			
	S.No.	Name	Age	Relationship
16.	Advance required , if so required Amount		Yes/No Amount Rs...	
17.	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.			
	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 ofyears.			
	Date: Place:		Signature of the Applicant (Name of the Applicant)	



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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.



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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.

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/Calender Year



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APPLICATION FORM FOR SEEKING LEAVE TRAVEL CONCESSION AT AIIMS DEOGHAR

01.	संकाय सदस्य/अधिकारी/कर्मचारी का नाम Name of faculty member/Officer/Employee			
02.	पदनाम एवं विभाग Designation & Department			
03.	दिन एवं अवकाश अवधि (यदि अधिकारी के स्वयं का एलटीसी चाहें हो तो) No. of days & period of the leave required (in the case of the officer himself/herself wants to avail LTC)			
04.	अवकाश की प्रकृति (आकस्मिक/अर्जित/ग्रीष्म/शीतकालीन अवकाश) Nature of leave required (Casual leave/Earned leave/Summer/Winter Vacation etc.)			
05.	क्या एलटीसी गृह शहर अथवा भारत में कहीं भी जाने के लिए है। (स्थान नाम चिन्हांकित करें, एवं खण्ड वर्ष भरें) Whether LTC is required to visit Home-Town or within India (Name of the place be indicated) by indicating the Block Year.			
06.	क्या एलटीसी स्वयं/पारिवारिक सदस्य हेतु अपेक्षित है (आवेदनकर्ता स्वयं निर्दिष्ट करें)। यदि आवेदक के पति/पत्नी शासकीय संस्था में हैं, तो संस्था से शपथ पत्र कि उनके द्वारा खंड वर्ष के लिए अवकाश यात्रा रियायत नहीं लिया गया है। यदि प्रमाण पत्र उपलब्ध नहीं है तो पति/पत्नी द्वारा यह प्रमाणित किया जाना है कि उनके द्वारा एलटीसी नहीं लिया गया है। Whether LTC is required for self/family members (Name of the applying person be indicated. If his/her spouse works in Government offices a certificate from the employer of spouse is required that he/she has not availed LTC for the block year so requested. If the certificate is not available, then the applying person should certify that his/her spouse has not availed LTC for the Block Year so, requested.	नाम Name	उम्र Age	संबंध Relationship
07.	उक्त अनुसार प्रमाण पत्र की आवश्यकता जिसमें आवेदक के पारिवारिक सदस्य यथा माता, पिता, पुत्र, पुत्री हैं जो उनपर निर्भर है और उनकी कुल मासिक आय रु. 9000/- (जिसमें पेंशन व अन्य सहित) से अधिक न हो। और उनके द्वारा खण्ड वर्ष में एलटीसी नहीं लिया गया है। Similarly a certificate is required that his/her other family members e.g. Mother/Father/Son & Daughter etc. are dependent and the total income does, not exceed more than of Rs. 9000/- per month including stipend or pension, temporary, increase in pension but excluding Dearness Relief on him/her and they have not availed LTC for the Block Year so required.			
08.	क्या अर्जित अवकाश को भुनाया गया। यदि हां, तो कितने दिन, कृपया उल्लेख करें। Whether encashment of Earned Leave is required. If yes, specify no. of days.			

नोट- ससुराल पक्ष के रिश्तेदार एल.टी.सी. हेतु एलटीसी नियमों के अनुसार पात्र नहीं है। Note- The In-Laws are not entitled to LTC according to LTC Rules.

दिनांक Dated -

(संकाय सदस्य के हस्ताक्षर)

Signature of the Faculty Member

अनुशंसा/विभागाध्यक्ष के हस्ताक्षर Recommendations/remarks of Head of the Department



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द्वितीय सूची पत्र

THE SECOND SCHEDULE

नियम 3(झ)

[See Rule 3 (h)]

प्रपत्र 1

FORM 1

[नियम 14 देखें]

See Rule 14

APPLICATION FOR EXTENSION OF LEAVE (in case LTC is availed)

अवकाश के विस्तार के लिए प्रार्थना पत्र (एल.टी.सी.का लाभ प्राप्त करने की स्थिति में)

1.	आवेदक का नाम Name of applicant	
2.	पदनाम Designation	
3.	विभाग, कार्यालय एवं अनुभाग Department, Office and Section	
4.	वेतन Pay	
5.	वर्तमान पद में आहरित अन्य प्रतिपूरक भता एवं मकान किराया House Rent and other Compensatory Allowance drawn in the present post	
6.	आवेदित अवकाश की प्रकृति एवं अवधि तथा तिथि Nature and Period of leave applied for and date from which required	
7.	रविवार एवं अवकाश, यदि कोई है, छुट्टी से पूर्व या पश्चात प्रस्तावित Sunday and holidays, if any, proposed to be refixed/suffixed to leave.	
8.	आवेदित अवकाश का आधार Grounds on which leave is applied for	
9.	पिछले अवकाश से लौटने की तिथि एवं उस अवकाश की प्रकृति एवं अवधि Date of return from last leave, and the nature and period of that leave	
10.	मैं स्वयं को छुट्टी यात्रा को प्राप्त करने के लिए प्रस्तावित करता हूँ/ नहीं करता हूँ आगामी अवकाश के दौरान ब्लॉक वर्ष..... हेतु छूट I propose/do not propose to avail myself of leave travel concession for the block year during the ensuing leave	
11.	अवकाश अवधि के दौरान पता Address during leave period	

आवेदक के हस्ताक्षर (तिथि सहित)

Signature of Applicant (With Date)



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12. नियंत्रक अधिकारी की टिप्पणियां तथा/या संस्तुति

हस्ताक्षर (तिथि सहित)
पदनाम

Remarks and/ or recommendation of the Controlling Officer:

Signature (With Date)
Designation

अवकाश की स्वीकार्यता के संबंध में प्रमाण पत्र
(Certificate Regarding Admissibility of Leave)

13. यह प्रमाणित किया जाता है कि केंद्रीय सिविल सेवा छुट्टी नियमावली, 1972 के नियम.....
के तहत दिनांकसेतक (अवकाश की प्रकृति) स्वीकार किया जाता है।

Certified that.....(nature of leave) for(period) fromto
.....is admissible under Ruleof the Central Services (Leave) Rules, 1972.

हस्ताक्षर (तिथि सहित)
Signature (With Date)

पदनाम
Designation

14. अवकाश प्रदान करने हेतु सक्षम अधिकारी का आदेश
Orders of the authority competent to grant leave

हस्ताक्षर (तिथि सहित)
Signature (With Date)

पदनाम
Designation



UNDERTAKING FOR LTC

CERTIFICATES TO BE GIVEN BY THE GOVERNMENT SERVANT

1. I have not submitted any other claim so far for Leave Travel Concession in respect of myself or my family members in respect of the block of two years 20..... and 20.....
2. I have already drawn T.A. for the Leave Travel Concession in respect of a journey performed by me/ my wife with children. This claim is in respect of journey performed by my wife/ myself with children none of whom travelled with the party on the earlier occasion.
3. The journey has been performed by me /my wife with children to the declared “home town”, viz.....
4. That my husband/ wife is not employed in Government service.

That my husband/wife is employed in Government service and the concession has not been availed of by him/her separately for himself/herself or any of the family members for the concerned block of two years.

Signature of the Government servant



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FORM I FROM OF SURETY BOND FOR LTC Advance (Vide Rule 5)

KNOW ALL MEN BY THESE PRESENTS THAT I, _____ Son/ daughter /wife of _____ resident of _____, in the District of _____ at present employed as a permanent _____ in the _____ (hereinafter called "the Surety") am held and firmly bound unto the President of India (hereinafter called "the Government" which expression shall include his successors in office and assigns) in the sum of Rs. _____ (Rupees _____ only) to be paid to the Government FOR WHICH PAYMENT TO be well and truly made I hereby bind myself, my heirs, executors, administrators and representatives firmly by these presents. As witness my hand this _____ day of _____ Two thousand and _____.

WHEREAS the government has agreed to grant to _____, son/ daughter/ wife of _____, resident of _____ in District of _____ at present employed as a temporary _____ in the "AIIMS Deoghar" (hereinafter called "the Borrower") at the Borrower's own request an advance of Rs..... (Rupees..... only) for theAND WHEREAS THE BORROWER has undertaken to repay the said amount in.... Equal monthly instalments with interest as calculated at the rate and in the manner prescribed under Rule 20 and Government of India's Decisions (1) and (2) thereunder of the compendium thereon or on so much thereof as shall for the time being remain due and unpaid calculated at fixed Government rates in force for Government loans form the day of the advance.

AND WHEREAS in consideration of the Government having agreed to grant the aforesaid advance to the Borrower the Borrower the surety has agreed to execute the above bond with such condition as hereunder is written.

NOW THE CONDITION OF THE ABOVE WRITTEN Bond is that if the said Borrower shall, while employed in the said _____, _____ duly and regularly pay or cause to be paid to the Government the amount of the aforesaid advance owing to the Government by instalments with interest as calculated in the aforesaid manner thereon or on so much thereof as shall for the time being remain due and unpaid calculated at fixed Government rates in force for Government loans from the day of the advance until the said sum of Rs.....(Rupees.....only) with interest as calculated in the aforesaid manner shall be duly paid, then this Bond shall be void, otherwise the same shall be and remain in full force and virtue.

BUT SO NEVERTHELESS that if the Borrower shall die or become insolvent or at any time cease to be in the service of the Government, the whole or so much of the said principal sum of Rs. _____ (Rupees _____ only) together with the interest as shall then remain unpaid shall immediately become due and payable to the Government and recoverable from the Surety in one instalment by virtue of this Bond.

The obligation undertaken by the Surety shall not be discharged or in any way affected by an extension of time or any other indulgence granted by the Government to the said Borrower.

The stamp-duty payable in respect of these presents shall be borne and paid by the Government.

Signed and delivered by the said

At.....this..... Day of.....

In the presence of:

1st Witness:

Name:

Designation:

Address:

2nd Witness:

Name:

Designation:

Address:

Signature of Surety _____ **Designation** _____

Office to which attached _____



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Amount of advance, if any, drawn ₹ _____

(अग्रिम राशि, यदि आहरित की गई हो ₹ _____)

1. Cash / Cheque (if Cheque, please mentioned cheque number and date) _____

रोकड़/चैक (यदि चैक है, कृपया चैक नम्बर और दिनांक उल्लेखित करें) _____

2. Particulars of journey(s) for which higher class of accommodation than the one or which the Government servant is entitled, was used. (Sanction No. & Date to be given).

(सरकारी कर्मचारी द्वारा पात्रता से उच्च श्रेणी में की गई यात्रा का विवरण)(स्वीकृति संख्या और दिनांक उल्लेखित करें)

Place		Mode of conveyance	Class to which entitled	Class by which Actually traveled	No. of fares	Fare paid
From	To					

3. Particulars of journey(s) performed by road between places connected by rail.

(रेलमार्ग द्वारा संयोजित स्थानों के बीच सड़क मार्ग से की गई यात्रा का विवरण)

Name of Place		Class to which entitled	Rail fare
From	To		

Certified that the (प्रमाणित किया जाता है कि):-

- Information, as given above is true to the best of my knowledge and belief: and (ऊपर दी गयी सूचनाएँ मेरे सर्वोत्तम ज्ञान और विश्वास के अनुसार सत्य हैं: तथा)
- That my husband/wife is not employed in Government service/that my husband/wife is employed in Government service and the concession has not been availed of by him/her separately or himself/herself or for any of the family members for the concerned block of _____ years.

(कि मेरे पति/पत्नि सरकारी सेवा में कार्यरत नहीं हैं/कि मेरे पति/पत्नि सरकारी सेवा में कार्यरत हैं और उनके द्वारा अलग से या उनके या परिवार के किसी भी सदस्य के लिये सम्बन्धित वर्ष खण्ड _____ के लिए रियायत का लाभ नहीं उठाया गया है)

Signature of Employee
(कर्मचारी के हस्ताक्षर)

Note: (1) Time limit for submission of claim (दावा प्रस्ताव हेतु समय सीमा):

- If advance drawn- Within One Month from the date of completion of return journey.
- If advance not drawn- Within Three Months from the date of completion of return journey.

(2) All the supporting document i.e. tickets/invoice bill should be self-certified.
(सभी सहायक दस्तावेज अर्थात टिकट्स/इनवॉइस बिल स्व-प्रमाणित होने चाहिए।)



CERTIFICATE TO BE GIVEN BY GOVERNMENT SERVANT

(सरकारी कर्मचारी द्वारा दिया जाने वाला प्रमाण पत्र)

1. I have not submitted any other claim so for Leave Travel Concession in respect of myself or my family members in r/o the block of the years.....
(मेरे द्वारा अपने या अपने परिवार के सदस्यों के सम्बन्ध में वर्ष खण्ड में अवकाश यात्रा रियायत के लिए कोई अन्य दावा प्रस्तुत नहीं किया गया है।)
2. I have already drawn TA for the Leave Travel Concession in respect of journey performed by me/my wife with children. The claim is in respect to the journey performed by my wife/myself with children none of whom travelled with the party on the earlier occasion.
(मेरे द्वारा पूर्व में ही मैं/मेरी पत्नि तथाबच्चों के द्वारा की गयी यात्रा के सम्बन्ध में अवकाश यात्रा रियायत के लिए यात्रा भत्ता आहरित किया गया है। उपरोक्त में से किसी ने भी पार्टी के साथ पूर्व में यात्रा नहीं की है।)
3. I have not already drawn TA for the Leave Travel Concession in respect of a journey performed by me / my wife with children/..... children in respect of the block of two years This claim is in respect of the journey performed by my wife with children/... children none of whom availed of the concession relating to that block.
(मेरे द्वारा पूर्व में ही सम्बन्धित द्विवर्षीय खण्ड में, मैं/मेरी पत्नि तथाबच्चों के द्वारा की गयी यात्रा के सम्बन्ध में अवकाश यात्रा रियायत के लिए यात्रा भत्ता आहरित नहीं किया गया है। यह दावा मेरी पत्नि, बच्चों के साथ की गयी यात्रा के दावे से सम्बन्धित है। उपरोक्त में से किसी ने भी उस खण्ड से सम्बन्धित रियायत का लाभ नहीं उठाया है।)
4. I have already drawn TA for the Leave Travel Concession in r/o a journey performed by me in the year.....in r/o of block of two years This claim is in r/o of the journey performed by me in the year This is against the concession admissible once every year in a prescribed block for visiting home town as all the members of my family are living away from place of work.(मेरे द्वारा पूर्व में ही वर्ष..... में, सम्बन्धित द्विवर्षीय खण्ड.....में की गयी यात्रा के सम्बन्ध में अवकाश यात्रा रियायत के लिए यात्रा भत्ता आहरित किया गया है। यह दावा मेरे द्वारा वर्ष..... में की गयी यात्रा के सम्बन्ध में है। यह एक निर्धारित ब्लॉक में हर साल एक बार ग्रहनगर जाने के लिए स्वीकार्य रियायत के खिलाफ है क्योंकि मेरे परिवार के सभी सदस्य कार्य के स्थान से दूर रह रहे हैं।)
5. The journey has been performed by me / my wife children /children to the declare home town viz यह यात्रा घोषित मुख्यालय अर्थात्..... को मेरे/मेरी पत्नि/बच्चों के द्वारा की गयी है।
6. That my husband / wife is not employed in Government. That my husband / wife is employed in Government Service and the concession has not been availed of by him/her separately for himself/ herself or for any of the family members for the concerned block of two years.
(कि मेरे पति/पत्नि सरकारी सेवा में कार्यरत नहीं है। कि मेरे पति/पत्नि सरकारी सेवा में कार्यरत हैं और मेरे द्वारा पृथक रूप से मेरे लिये या किसी भी परिवार के सदस्य के लिए सम्बन्धित द्विवर्षीय खण्ड के लिए रियायत का लाभ नहीं उठाया गया है)
7. Certified that my wife / husband for whom L.T.C. is claimed by me is employed i..... (Name of the Public Sector Undertaking/Corporation/Autonomous body etc.) Which provides Leave Travel Concession facilities but he/she has not preferred and will not prefer, any claim in this behalf from his/her employer.
(यह प्रमाणित किया जाता है कि मेरी पत्नि/पति जिनके लिये L.T.C का दावा मेरे द्वारा किया गया है,..... (सार्वजनिक क्षेत्र के उपक्रम/निगम/स्वायत्त निकाय आदि) में कार्यरत हैं, जो कि अवकाश यात्रा रियायत की सुविधा प्रदान करता है लेकिन इस सम्बन्ध में अपने नियोक्ता से उन्होंने दावा नहीं किया है और दावा नहीं करेंगे)
8. Certified that my wife / husband for whom L.T.C. is claimed by me is not employed in any Public Sector Undertaking / Corporation/Autonomous body financed wholly or partly owned by the Central Government Local Body which provides L.T.C facilities to its employees and their families.
(यह प्रमाणित किया जाता है कि मेरी पत्नि/पति जिनके लिए L.T.C. सुविधा का मेरे द्वारा दावा किया गया है, वह किसी भी सार्वजनिक क्षेत्र के उपक्रम/निगम/स्वायत्त निकाय जो कि केन्द्र सरकार स्थानीय निकाय द्वारा पूर्ण रूप से वित्त पोषित या आंशिक रूप से स्वामित्व के नहीं है, जो L.T.C. की सुविधा अपने कर्मचारियों और उनके परिवार को प्रदान करते हैं, में कार्यरत नहीं है।)

Signature of Employee
(कर्मचारी के हस्ताक्षर)

अखिल भारतीय आयुर्विज्ञान संस्थान, देवघर- 814152
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, DEOGHAR-814152(INDIA)
(स्वास्थ्य एवं परिवार कल्याण मंत्रालय, भारत सरकार के अधीन राष्ट्रीय महत्व का संस्थान)
(An Institution of National Importance under Ministry of Health & Family Welfare)
भारत सरकार/ Government of India
Website-www.aiimsdeoghar.edu.in

No: AIIMS Deoghar/Admin/ LTC/2024

Date: .08.2024

Circular

Subject: Circulation of guidelines regarding LTC/ Home Town LTC.

All Faculties/ Officers/ Employees who intend to avail Hometown LTC/ All India LTC are requested to go through following guidelines:-

1. If a Faculty/ Officer/ Staff intends to avail LTC/ Home Town LTC, he shall ensure before applying for LTC/ Home Town LTC that:-
 - a. He/ She will ensure that his home town is correctly indicated in his service records. Otherwise he should take action to have his hometown entered therein.
 - b. He/ She will ensure that his family details are updated.
 - c. When the Government Servant intends to avail of the Leave Travel concession to visit "anywhere in India" by himself or by any member(s) of his family, He/ She should declare the intended place of visit to the Controlling Officer. The official and/ or member(s) of the family must visit that place to become eligible for reimbursement of the claim.
 - d. If Faculty/ Officer/ Staff wants to change intended place of visit, must take permission before commencing journey.
 - e. Whenever the Faculty/ Officer/ Staff intends to avail LTC he should inform the Controlling Officer before commencement of the journeys and also ensures that leave is granted before commencing journey.
 - f. If there is any change in the intended place of visit, he should intimate the same to the Controlling Officer before the commencement of the journey.
 - g. In all cases of air travel in respect of LTC, air tickets shall be purchased only from the three Authorized Travel Agents (ATAs), namely:
 - (a) M/s Balmer Lawrie & Company Limited (BLCL),
 - (b) M/s Ashok Travels & Tours (ATT),
 - (c) Indian Railways Catering and Tourism Corporation Ltd. (IRCTC).

- h. Faculty/ Officer/ Staff should to book flight tickets at least 21 days prior to the intended date of travel on LTC, to avail the most competitive fares and minimize financial burden on the Institute.
 - i. If spouse of Faculty/ Officer/ Staff is employed in a Government Organization, Autonomous Body or PSU or any Government Establishment, he have to submit joint declaration through office of the employers.
2. After return from LTC/ Home town LTC, Faculty/ Officer/ Staff should submit his claim as under:-
 - a. Claim form should be duly filled in annexure-I,
 - b. Faculty/ Officer/ Staff should produce evidence of his having actually performed the journey.
 - c. If he takes an advance under this scheme, he should ensure that the outward journey is commenced within 30 days of grant of the advance or refund the full advance. In all cases, tickets should be produced within ten days of drawl of the advance. He should see that half the advance is refunded if the period of leave/ absence exceeds 90 days.
 - d. He should submit bills adjusting the advance taken within one month form the completion of the return journey.
 - e. All the bill should be duly verified by the Government Servant.
 3. In case of submission of false statements, Government Servant liable for appropriate action under Rule-16 of CCS (LTC) Rules, 1988 and the relevant disciplinary rules. Government Servant have to submit self-certification in the proforma in annexure-II.
 4. Faculties/ Officers/ Staffs are also advised to go through CCS (LTC) Rules, 1988, Compilations of orders issued by DoPT vide OM No.DOPT-1714455840135 dated 30 April, 2024 and clarifications issued from time to time by DoPT in this regard.

This issues with the approval of the Competent Authority.

Signed by

Amrendra Kumar
Dy. Director (Admin)

Date: 28/08/24

Copy to:-]

1. Executive Director, AIIMS Deoghar
2. MS/ All Deans/ HODs/ Principal CON/ EE (C)/ EE (E) AIIMS Deoghar
3. Accounts Officer, AIIMS Deoghar
4. All faculties/ staffs AIIMS Deoghar

5. Guard File.

Annexure-I

(LEAVE TRAVEL CONCESSION BILL)

Sub Bill No.....

For the Block Years: -

Type of LTC: Home Town LTC/ All India LTC/ All India LTC (Converted from HLTC)

(NOTE:- This bill should be prepared in duplicate One for payment and the other as office copy)

PART 'A'

(To be filled by the Government Servant)

1. Particulars of Members of family in respect of whom the Leave Travel Concession has been claimed.

Sl No	Name(s)	Age	Relationship with the Government servant.	Occupation
1				
2				
3				
4				
5				

2. Details of Journey(s) performed by Government Servant and the members of his/her Family.

Departure Date, time & Place	Arrival Date, time & Place	Distance	Mode of travel	Class of Accommodation used	No. of fare	Fares paid	
						Rs.	
Total Amount							
Amount of Advance Drawn, if any							
Amount Claimed After Advance							

3. Amount of advance, if any, drawn:-

(Signature of Govt. Servant)

Contd. To P/2..

(02)

4. Particulars of journey(s) for which higher class of accommodation than the one to which the Government servant is entitled, was used (Sanction No. and date to be given):-

Place		Mode of Conveyance	Class to which entitled	Class which actually travelled	by No. of fares	Fares paid	
From	To					Rs.	Ps.

5. Particulars of journey(s) performed by road between places connected by rail:-

Name of places		Class to which entitled	Rail fare	
From	To		Rs.	Ps.

CERTIFIED THAT:-

- The information as given above is true to the best of my knowledge and belief;
- That my husband/wife is not employed in Government service/that my husband/wife is employed in Government service and the concession has not been availed of by him/her separately for himself/herself or for any of the family members for the concerned block of year -----
- That my husband/wife for whom LTC is claimed by me is employed in (name of the Public Sector Undertaking/Corporation/Autonomous Body, etc.), which provides Leave Travel Concession facilities but he/she not preferred and will not prefer, any claim in this behalf to his/her employer; and
- That my wife/husband for whom LTC is claimed by me is not employed in any Public Sector Undertaking/ Corporation/Autonomous Body financed wholly or partly by the Central Government or a Local Body, which provides LTC facilities to its employees and their families.
- That my family members shown above are fully dependent upon me.
- 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 Government servant

Date:.....

Name:
Designation:.....

Employee Code:

Email:

Certificate to be Given by Administration

1. Certified that necessary entries have been made in the service book of Dr./shri/
Smt/ Ku.
2. Joint Declaration/ Certificate received from his/ her husband's/ wife's Office. He will
avail LTC & other benefits from this office.

Signature of the Officer Authorized to attest in the service book

Annexure-II

Self-certification by the Government Employees.

1. I Dr./Sh./Smt./Kr..... wish to confirm that I am availing (Home Town/ All India LTC) in respect of self/ family member (s) for the block year..... to visit during 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. The Particulars of members of family in respect of whom the LTC is being claimed are as under:

SL No	Name (s)	Age	Relationship with the Govt. Servant	Occupation

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.

Name & Signature of Gov. Servant
Designation.....