

Form 19
(See rule 32(1))
Register For Leave With Wages

1. Employee Name :-
2. Sex :-
3. Father's/Husband Name :-
4. Sr.No.in Employee's Regi.:-
5. Department :-
6. Designation :-

Employment Join Date

7. Date of discharge/dismissal/Quitting employment/
superannuation /death while in service
8. Date of payment in lieu of leave with wages due in such case
9. Whether leave in accordance with scheme under
section was refused

Calander year of service (ie. Previous year)	Leave due as on 1 st January Of the year in col.1	Leave availed during the year		Number of working days for computation of leave during the year mentioned in Col.1						Regular leave earned for the year mentioned in col.1	Balance of leave - admissible on 1 st January of the year following the year mentioned in column1 (Col. 2 +11-5)	Date & Amount of payment made in lieu of leave due								Signature
		Date		No.of Days	Days Worked	Lday off	Maternity Leave Upto 12 Weeks	Leave with wages employed	Total (6 to 9)			No. of days for which leave paid	Rate of wage as per Section- 2(zz) of the OSH code- 2020	Total amount paid (Col.13x1 4)	Discharged worker					
		From	To												Date of discharge	No. of balance days for which leave paid	Rate of wages as per Section 2(ZZJ) of the OSH code-2020	Date & Amount of payment made in lieu of leave due		
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
JAN																				
FEB																				
MAR																				
APR																				
MAY																				
JUN																				
JULY																				
AUG																				
SEP																				
OCT																				
NOV																				
DEC																				
TOTAL:																				