	Regis		ing Refus	al of Leave	2
Serial No.	Date of receipt of complaint address	Name of employ reportir	ee a	lame and ddress of e employer	Name of the es- tablishment and its postal
1	2	3		4	5
	rticulars of leave		Date of	Leave	
Nature a	und Da	te of ap-	Date of	refus	al (as to dis
	and Dates Da		Date of	20010	al (as to dis

FORM K [See rule 13(3)] gister of entering Refusal of Leav