PROFORMA FOR RE-IMBURSEMENT OF CHILDREN EDUCATION ALLOWANCE

CLAIM FOR THE ACADEMIC YEAR: ______________________

I hereby apply for the reimbursement of Children Education Allowance / Hostel-Subsidy for my child / children and relevant particulars are furnished below:

<table>
<thead>
<tr>
<th>Sequence</th>
<th>Name of the Gov’t Servant (IN BLOCK LETTER)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td>:</td>
</tr>
</tbody>
</table>

| 2.       | Employee No.                               | : |
| 3.       | Designation                                | : |
| 4.       | Name of the Department                     | : |
| 5.       | If Spouse is employed, state whether in Central Govt. PSU, State Govt. (give details with name of the Spouse) | : |
| 6.       | Designation, Office of spouse, if spouse is employed | : |

<table>
<thead>
<tr>
<th>7.</th>
<th>Details of the child / children for whom CEA / Hostel Subsidy claimed:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st Child</td>
<td>Name of child</td>
</tr>
<tr>
<td>2nd Child</td>
<td>Name of child</td>
</tr>
</tbody>
</table>

8. Amount Claimed: ____________________________________________________

9. Distance of Hostel of child from residence of employee (in case Hostel Subsidy): _____

10. The Academic year for which CEA / Hostel Subsidy is applied now: ____________

11. (a) Whether the child for whom the CEA is applied for is a disabled child:  
    Yes [ ] / No [ ]  
    (b) If yes, indicate the nature of disability: _______________________________ 
    (c) Date of disability certificate: _______________________________ 
    (d) Indicate the percentage of disability: _______________________________

12. Whether the Bonafide certificate from Head of Institution has been attached:  
    Yes [ ] / No [ ]

13. For Hostel Subsidy, the Bonafide certificate from Head of Institution has been attached : Yes [ ] / No [ ]
14.  (a) Certified that I or my wife / husband is/ is not a Central Government servant.

(b) Certified that my wife / husband Sri/Smt _____________________________ is presently working as ___________________________ in ________________ and that he/she shall not apply / has not applied for the Children Education Allowance for the child / children mentioned above.

(c) Certified that I or my wife / husband has not claimed this re-imbursement from any other source and will not claim the same in future.

15. Certified that my child in respect of whom re-imbursement of Children Education Allowance is applied is studying in the School / Jr. College which is recognized and affiliated to Board of Education / University.

16. Certified that I am claiming the CEA in respect of my two eldest surviving children only. The information furnished above are complete and correct and I have not suppressed any relevant information. In the event of any change in the particulars given above which affect my eligibility for reimbursement of Children Education Allowance, I undertake to intimate the same promptly and also to refund excess payments if any made. Further, I am aware that if at any stage the information / documents furnished above is found to be false, I am liable for disciplinary action.

Date: ____________
Place: ____________

(Signature of Gov’t Servant)

Name: _______________________
Designation: ___________________
Employee No.: ____________________
Phone No : ____________________
Certified from the Head of Institution / School (For Reimbursement CEA)

Ref No……………… Date:……………………

It is certified that Master/ Kumari ______________________

having Admission No_________ D.O.B_________ Son / Daughter of Mr /Mrs. ____________________________ was studying in Class ________

Section _____ Roll No.___________ during the Previous Academic Year from ________ to _________ School / Institution, namely ________________, vide affiliation Regd. No. /Code ________________ and pattern ____________________

Curriculum.

Place: ______________

Date:- ______________

Signature of Principal
(Affix School Stamp)
Authority vide Government of India Ministry of Personal P.G and Department of Personal & Training New Delhi Order No. A-27102/02/2017-Estt. (AL) 16 August 2017
(This order shall be effective from 01st Jul 2017)

CERTIFICATE FROM THE HEAD OF INSTITUTION /SCHOOL
(FOR REIMBURSMENT CEA)

Ref No………………….. Date:…………………………

It is certified that Master/ Kumari ____________________________
having Admission No__________D.O.B__________ Son / Daughter of Mr /Mrs.
___________________________was studying in Class ________
Section _____ Roll No.__________ during the Previous Academic Year from
___________ to _________ School / Institution, namely
___________________________ vide affiliation Regd. No. /Code
___________________________and pattern ______________
Curriculum.

During the year Mr./Miss__________________________________had
resided in the Residential Complex (Hostel) of the School and paid an
amount of Rs. ________________________ towards boarding and lodging in
the residential complex.

Place: ______________

Date:- ______________

Signature of Principal
(Affix School Stamp)