

\* Duplicate Set also req.

CLAIM FOR THE ACADEMIC YEAR: \_\_\_\_\_

Salary Head: DOT/WPC/USOF/MOC

## Children Education Allowance/Hostel Subsidy Claim

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

1	Name of the Employee	:	
2	Employee No.	:	
3	Designation & Section	:	
4	Name of Spouse	:	
5	If spouse is employed, state whether in Central Govt., PSU, State Govt. (give details)	:	

Details of all the children for whom CEA/Hostel Subsidy claimed (for first 2 children or first 3 children in case of twins):

No.	Name	DOB	Class	Name of School/ Residential School	Amount Claimed
(in case of twins)					

(a) Whether the child for whom the CEA is applied for is a disabled child: YES / NO

(b) If yes, kindly enclose the disability certificate.

For CEA:

Whether the certificate confirming that the child studied in the school during previous academic year from Head of Institution has been attached: Yes / No

For Hostel Subsidy:

Whether the certificate confirming that the child studied in the residential school during previous academic year from Head of Institution, also mentioning the amount of expenditure incurred towards lodging and boarding, has been attached: Yes / No

(i) Certified that my wife/husband is / is not a Central Government Servant.

(ii) Certified that my husband/wife Shri/Smt ..... is presently working as ..... in ..... and that he/she shall not apply/has not applied for the Children Education Allowance for the child mentioned above.

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

(iv) Certified that my child in respect of whom reimbursement of Children Education Allowance is applied is studying in the School/Jr. College which is recognized and affiliated to Board of Education/University.

11. The information furnished above is 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 are found to be false, I am liable for disciplinary action.

Date:

Signature

Name: \_\_\_\_\_

Designation: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Bank A/c No.....

Bank Name.....

IFSC Code.....

**CERTIFICATE FROM THE HEAD OF INSTITUTION/SCHOOL**

For reimbursement of CEA/Hostel Fee

This is to certify that Master/Kumari/Mr./Miss \_\_\_\_\_  
having Admission No. \_\_\_\_\_ DOB \_\_\_\_\_  
son/daughter of Mr./Mrs. \_\_\_\_\_ is/was a bonafide student  
of this school and studied in Class \_\_\_\_\_ during the previous  
academic year from \_\_\_\_\_ to \_\_\_\_\_.

\*\* During the year Master/Kumari \_\_\_\_\_ had resided in  
the residential complex (Hostel) of the school and paid an amount of  
Rs \_\_\_\_\_/- towards boarding and lodging in the residential  
complex.

This \_\_\_\_\_ Institution/School \_\_\_\_\_ is \_\_\_\_\_ affiliated/recognized \_\_\_\_\_ by  
\_\_\_\_\_ and the Affiliation/Recognition Number is  
\_\_\_\_\_.

Dated:

Place:

**Signature**  
**Head of the Institution/School**  
**(with Stamp and seal)**

\*\* (Strike out if not applicable)