PROFORMA FOR REIMBURSEMENT OF CHILDREN EDUACATION ALLOWANCE

CLAIM FOR THE ACADEMIC YEAR: 2021-22

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

	child/children and relevant particulars are lurnished below:-									
1.	Name of Govt S	Servant								
2.	Employee ID									
3.	Designation									
4.	Name of the off	ice								
5.	Date of Entry in	department								
6.	Last year CEA t	aken from which I	Ю							
7.		ployed, state whet details with name								
8.	Designation, O employed in Ra	ffice & B.U. No.								
		11114								
9.		e child/children	for who	m CEA/Host	el Subsidy cl	aimed:-				
9.		•	DOB	m CEA/Host Standard	(A.Y.2021-2 022)	Name & Place of the School/Institution				
9.	Details of the	e child/children			(A.Y.2021-2	Name & Place of the				

8. Re-imbursement of Expenditure:-

Sequence	Period	Rate of CEA (Rs)	Amount Claimed	Remarks
1st Child	April-21 to Mar-22	2250- Per Month	27000	Fixed amount
	•			
2 nd Child	April-21 to Mar-22	2250- Per Month	27000	Fixed amount
	•			
	Total Amount Claimed	Rs	/-	

	2						
9. 10. 11. 12.	Distance of Hostel of child from residence of employee (In case of Hostel subsidy): Amount of CEA/Hostel Subsidy already received upto previous quarter:NIL The Academic year for which CEA/Hostel Subsidy is applied now:-2021-22 (a) Whether the child for whom the CEA is applied for is a disabled Child:NO (b) If Yes, indicate the nature of disability:						
	(c) Date of disability certificate:						
	(d) Indicate the percentage of disability:						
13.	Whether the bonafide certificate from Head of Institute has been attached: Yes						
14. attache	For Hostel Subsidy, the Bonafide certificate from mentioning the amount is ed: NA						
15.	If Yes at Item No. 14, Amount claimed for Hostel Subsidy: Rs.—NA—						
16.	(a) Certified that my wife/husband is not a Central Government Servant.						
working	(b) Certified that my wife/husband Shri /Smt is presently as in and that he/she will not apply/ has not applied for the Children Education Allowance for the child 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.						
	Certified that my child in respect of whom re-imbursement of Children Education Allowance is studying in the School/ Junior College which is recognized and affiliated to Board of on / University.						
informate reimburg to refund	Certified that I am claiming the CEA in respect of my two eldest surviving children only, The tion furnished above are complete and correct and I have not suppresses any relevant tion. In the event of any change in the particulars given above which affect my eligibility for sement of Children Education Allowance, I undertake to intimate the same promptly and also dexcess payment if any made. Further, I am aware that if at any stage the information/nts furnished above is found to be false, I am liable for disciplinary action.						
Date:							
Place:	(Signature of Govt Servant) Name: Desig.: Mobile No.						

SELF DECLARATION

Ι	Name	:					Of	In	dia	Post,	office
				do	herel	by	cert	tify	tha	t my	son
namely	⁷			stı	ıdied	in	class		Sec.	Roll	No
	Previo										
School											
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]	In the e	vent	of any	change	e in th	ne p	articu	lars g	given	above	which
affect 1	ny eligi	bility	for rein	nburse	ement	of	Childr	en E	ducat	ion Allo	wance
, I uno	dertake	to in	timate t	he sar	ne pro	omp	otly ar	nd als	so to	refund	excess
payme	nt if any	mad	e to me.								
1 3	J										
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	• • • • • • • •			•							
Place: .	• • • • • • • • •	• • • • • •							(Signat	ure of Gov	t Servant)
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								M	lobile N	lo	

SELF DECLARATION

Of India Post, office

Name :

I

do hereby certify	y that my son namely
studied in class Sec	Roll Noduring Previous
Academic Year 2021-2022 in	School.
In the event of any change in the part	ciculars given above which
, ,	
affect my eligibility for reimbursement of Chi	ildren Education Allowance
, I undertake to intimate the same promptly	and also to refund excess
payment if any made to me.	
Date:	
Place:	
riacc.	(Signature of Govt Servant)
	Name:
	Desig. :
	Mobile No

CERTIFICATE FROM THE HEAD OF INSTITUTION/SCHOOL

(FOR REIMBURSEMENT OF CHILDREN EDUCATION ALLOWANCE)

Date:-			
It is certified that Master/Kur	nari		
having, Admission No	•••••	D.O.B	
Son/ Daughter of Mr./Mrs	•••••	پ	
studying in class	Sec	Roll No	
during the previous academic	year from	to	
School/institution, namely			
	vide affiliation Reg	gd. No./Code	
and F	≁attern		
Curriculum.			
Place:-			
Date:-			
		Signature of Principal	
		(Affix School Stamp)	
		()	

CERTIFICATE FROM THE HEAD OF INSTITUTION/SCHOOL

(FOR REIMBURSEMENT OF CHILDREN EDUCATION ALLOWANCE)

Date:-						
It is certified that Master/Kuma	ari					
having, Admission No				D.O.B .		
Son/ Daughter of Mr./Mrs					٠	was
studying in class		Sec.		Roll N	No	
during the previous academic	year from			to		
School/institution, namely						
	vide a	ffiliation I	Regd. N	No./Code .		
and Pa	ittern				·····	
Curriculum.						
Place:-						
Date:-						
				s	ignature of Pri	ncipal
				(Affix School S	tamp)