

FORM – 2

REIMBURSEMENT OF CHILDREN EDUCATION ALLOWANCE

{Ref :OM No. 12011/03/2008 (Allowance) Dated 02/09/2009}

1. I, _____ (Name of the Employee) Certify that the children/child mentioned below in respect of whom re-imbursment of Children Education Allowance is claimed are/is wholly dependent on me:-

Name of the Child & Date of Birth	Name Of School	Class & Academic Year (A/Y)	Total Education fees#/expenses paid	Total Amount of reimbursement claimed
(1)	(2)	(3)	(4)	(5)
1)				
#Tuition fees – for the Whole Year / I/II/III/IV- Term				Rs.
Purchase of books (one Set/per child /per A/Y)				Rs.
Purchase of Note books (one Set/per child /per A/Y)				Rs.
Purchase of Uniforms (Two Sets/per child /per A/Y)				Rs.
Purchase of school shoes (one Set/per child /per A/Y)				Rs.
Total to be filled in column 4 above				Rs.
2)				
#Tuition fees – for the Whole Year / I/II/III/IV- Term				Rs.
Purchase of books (one Set/per child /per A/Y)				Rs.
Purchase of Note books (one Set/per child /per A/Y)				Rs.
Purchase of Uniforms (Two Sets/per child /per A/Y)				Rs.
Purchase of school shoes (one Set/per child /per A/Y)				Rs.
Total to be filled in column 4 above				Rs.

2. Certified that the Education fees/expenses indicated against the Child/Children has actually been paid by me (Receipts enclosed) **(Note: -Copy of School fee card & Bank challans/Paid up Receipts/ purchase receipts in original are to be enclosed)**

3. Certified that:-

- i. my spouse is not a Central Government servant
- ii. my spouse is a Central Govt. servant and that she/he has not claimed /will not claim children's educational allowance in respect of our child/children.

4. Certified that during the period covered by the claim the child attended the school regularly and did not absent himself/herself from the school without proper leave for a period exceeding one month.

5. In the event of any change in the particulars given above which affect my eligibility for children's educational allowance, I undertake to intimate the same promptly and also to refund excess payments, if any made.

Note : # Tuition Fee Means Tuition fee, Admission fee, lab fee, special fee charged for agriculture, electronics, music or any other subject, Fee charged for practical work under the Programme of work experience, fee paid for the use of any aid or appliance by the child, library fee, games/sports fee and fee for extra curricular activities.

PLACE.....

Date:.....

(Signature of the Employee)

Name-

PROFORMA FOR RE-IMBURSEMENT OF CHILDREN EDUCATION ALLOWANCE/HOSTEL SUBSIDY FOR THE ACADEMIC YEAR: _____.

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

1.	Name of the Employee	:	
2.	P.F. No./Employee No.	:	
3.	Designation	:	
4.	Present Department/Office	:	
5.	Name of Spouse	:	
6.	If spouse is employed, State whether in Central Govt., PSU, State Govt. (give details)	:	
7.	Name , Designation and Office address of the Spouse.		

8. Details of the children for whom CEA/Hostel Subsidy claimed:

Sl. No.	Sequence	Name	DOB	Age
1.	1 st Child			
2.	2 nd Child			

9. Name of School/Residential School and Class in which children studied:

1 st Child	2 nd Child

10. Distance of Hostel of child from residence of employee (in case Hostel Subsidy is claimed)_____.
11. The Academic year for which CEA /Hostel Subsidy is applied now: _____
12. (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:
14. Whether the Bonafide certificate from Head of Institution has been attached : Yes/No.
15. For Hostel Subsidy, the Bonafide certificate from mentioning the amount is attached: Yes/No

16. If Yes at Item No. 15, Amount claimed for Hostel Subsidy:.....
17. (i) Certified that the fee/amount indicate above had actually been paid by me.
(ii)Certified that my wife/husband is/is not a Central Government Servant.
(iii)Certified that my husband/wife Sri/Smt:..... is presently working as : inand that he/she shall not apply/has not applied for the Children Education Allowance for the child mentioned above.
(iv) 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.
18. 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.
19. 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.

Signature:

Name:

Design :

Date:

The details of child/children for whom the present claim is submitted by the official has been verified from the official records and found correct.

**Signature of Administrative Authority
with office stamp**

BONAFIDE CERTIFICATE FROM THE HEAD OF INSTITUTION/SCHOOL

This is to certify that Master/Baby/Mr./Miss
Son/ daughter of Sri/Smt.....Roll No.....
Admission No..... is a bonafide student of this school and studied in
Class..... during the academic year and as per
School records his/her date of birth is

**This is further certified that during the year Master/Baby/ 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.

This Institution/School is affiliated to/ recognized by.....
vide affiliation/recognition Number

Dated:
Place:

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

** (Strike out it if not applicable)