

PROFORMA FOR REIMBURSEMENT 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:-

1.	Name of the Govt Servant	:	
2.	ID No.	:	
3.	Designation	:	
4.	Name of the Section	:	
5.	If Spouse is employed, state whether in Central Govt., PSU, State Govt., Private company	:	Name of the office:
6.	Designation, Office of spouse, if spouse is employed in IA&AD office	:	
7.	Details of the child / children for whom CEA / Hostel Subsidy claimed:-		
	Sequence	Name of child	DOB
			Standard (A.Y.20 -)
			Name & Place of the School / Institution
	1 st Child		
	2 nd Child		

8. Reimbursement of Expenditure:-

Sequence	Period	Amount of CEA (Rs)	Amount of Hostel Subsidy (Rs)	Total Amount claimed (Rs)	Remarks
1 st Child					
2 nd Child					
Total					

9. Distance of Hostel of child from residence of employee (in case Hostel Subsidy):
10. Whether the child for whom the CEA is applied for is a disabled child :
Yes/No
 - a. If yes, indicate the nature of disability:
 - b. Date of disability certificate:
 - c. Indicate the percentage of disability:
11. Whether the Bonafide certificate from Head of Institution has been attached : Yes/No
12. For Hostel Subsidy, the Bonafide certificate mentioning the amount is attached: Yes/No
13. If Yes, Amount claimed for Hostel Subsidy: Rs.
14. (a) Certified that my wife / husband is / is not a Central Government servant.
 - a. 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.
 - b. Certified that my wife / husband has not claimed this reimbursement from any other source and will not claim the same in future.
15. 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.
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 are found to be false, I am liable for disciplinary action.

Date:
Place:

(Signature of Govt Servant)
Name:.....
Desgn/Sec.....
Mob./Extn.No. :

10C

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 01 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 Sec
 Roll No during the Previous Academic Year from
 to School/insitution, namely
 vide affiliation Regd. No./Code
 and pattern Curriculum.

Place:-

Date: -

Signature of the Principal

(Affix school stamp)