

APPLICATION FOR CLAIMING CHILDREN EDUCATION ALLOWANCE

Session.....

1. **Name of employee** :
- (Self attested photocopy of identity card)
2. **Father's/Husband's Name** :
3. **Date of entry in Government Service** :
4. **Date of entry in Department** :
- (Food, Civil Supplies & Consumer Affairs Department)
5. **Affiliated/recognized from** :
- (As per Haryana Civil Services (Allowance to Government Employees) Rules, 2016, Rule-25 (A) 1)

6. Particulars of Child/ Children	(i)	(ii)
	Name	
Date of Birth		
Class		
School Name		
Fee paid		
Period of Claim		

UNDERTAKING:-

I.....Son/Daughter/Wife/of....., do hereby solemnly affirm and declare as under:-

1. That all above contents from Sr. No. 1 to 6 are correct as per rule 25 of the Haryana Civil Services (Allowance to Government Employees) Rules, 2016 as well as existing Govt. Instructions issued in this regard from time to time.
2. That my spouse has not claimed education allowance from his/her office/department for aforesaid/period and the same claim has not been received by me from office so far.
3. That all requisite education expenses of my child/children likewise tuition fee, admission fee and other expenses (on books, uniforms, school shoes etc.) has been paid by me.
4. That if at any stage either of the contents are found incorrect/false. I shall be liable to face legal/disciplinary action under Haryana Civil Services (Conduct) Rules, 2016 and the Haryana Civil Services (Punishment & Appeal) Rules, 2016.

Dated: Signature :

Name of Employee :

Designation and Branch :

Mobile No. :