Indian Sign Language Research and Training Centre

Department of Empowerment with Persons with Disabilities (Divangjan) Ministry of Social Justice and Empowerment, Govt of India Module No. 403-406, 4th Floor, NSIC Business Park, Okhla Industrial Area, New Delhi – 110020

CLAIM FORM FOR RE-IMBURSEMENT OF CHILDREN EDUCATION ALLOWANCE

CLAIM FOR THE ACADEMIC YEAR:

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

1.	Name of the	Govt Servant			
2.	Employee C	ode.			
3.	Designation				
4.	Name of the	organisation / Sec	tion		
5.	. If spouse is employed, state whether in Central				
	-	, State Govt. (give o	details with name		
	of the Spous	se)			
6.	•	Office of Spouse,	•		
		any other Central	Govt., PSU , State		
		omous Body etc.			
7.	Details of the child / children for whom CEA / Hostel Subsidy claimed:-				
	Sequence	Name of Child	DOB	Standard	Name & Place of the School / Institution
	1st Child				
	2 nd Child				
	3 rd Child				

8. Re-imbursement of Expenditure:-

11.

Sequence	Period	Rate of CEA (P.M)	Amount Claimed	Remarks
		In Rs.	In Rs.	
1st Child				
2 nd Child				
3 rd Child				
	Total amount claimed ₹	E.		

- 9. Distance of Hostel of child from residence of employee (in case Hostel Subsidy):.....
- 10. The Academic year for which CEA / is applied now:.....
 - (a) Whether the child for whom the CEA is applied for is a disabled child :.....
 - (b) If yes, indicate the nature of disability:
 - (c) Date of disability certificate:
 - (d) Indicate the percentage of disability:
- 12. Whether the Bonafide certificate from Head of Institution/Self attested copy of report card or self attested receipt(s) (including e-receipt(s) confirming/ indicating that the fee deposited for the entire academic year has been attached: Yes /No
- 13. For Hostel Subsidy, the Bonafide certificate from mentioning the amount is attached:.....
- 14. If Yes at Item No. 13, Amount claimed for Hostel Subsidy: Rs..____

15. (a) Certificate that I or my wife / husband is / is not a Central Government servant.

(b) Certificate that my wife / husband Sri / Smtis presently working as:and that he / she shall not apply / has not applied for the Children Education Allowance for the child / children mentioned above.

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

16. Certificate that my child in respect of whom re-imbursement of Children Education Allowance as applied is studying in the school / Jr. College which is recognized and affiliated to Board of Education /University.

17. Certificate 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 is found to be false, I am liable for disciplinary action.

Date: _____

Place: _____

(Signature of Govt Servant)

Name:
Designation:
Employee No

FOR OFFICE USE ONLY

- 1. The name of the child referred herein has been verified from service record.
- 2. Bonafide certificate issued from the head of the institution / Self attested copy of report card or self attested receipt(s) (including e-receipt(s) confirming/ indicating that the fee deposited for the entire academic year attached.

S. No.	Name of Child	Amount Claimed	Amount admissible

Pass for payment of ₹	to Shri/ Ms.	towards
Reimbursement of CEA for the A. Y.	vide.	

Accountant

Section officer

Director/ Deputy Director (Admin)

The claim had been entered in CEA claim Register at Page no._____

An amount of ₹ has been reimbursed to Shri/ Ms. _____towards CEA vide cheque/ RTGS/ NEFT No. _____on

Received by:

Accountant

Authority Vide Government of India Ministry of Personnel, P.G. and Pensions Department of Personnel & Training, New Delhi Order No. N.A-27012/02/2017-Estt. (AL) 16th August, 2017

(This order shall be effective from 1st July, 2017)

CERTIFICATE FROM THE HEAD OF INSTITUTION / SCHOOL

(FOR REIMBURSEMENT OF CHILDREN EDUCATION ALLOWANCE)

Date			
having Admission No.			
Son / Daughter of Mr./ Mrs.			
_ Sec Roll No			
School / Institution, namely			
gnized by and			

Place: _____

Date: _____

Signature of principal (Affix School Stamp)

SELF - DECLARATION CERTIFICATE

Ι	employee	code _		Desig	nation		do
hereby certify that m	y Son / da	ughter	namely _			studied in	Class
Sec	Roll	No.		during	Previous	Academic	Year
	in						
				_ School.			

In the event of any change in the particulars given above which affect my eligibility for Children Education Allowance. I undertake to intimate the same promptly and refund excess payment, if any made to me.

Signature of Govt Servant

Name: _____ Designation: _____ Employee Code. _____

Place: _____

Date: