



भारतीय प्रौद्योगिकी संस्थान(भारतीय खनि विद्यापीठ)

धनबाद - 826004, झारखण्ड, भारत

Indian Institute of Technology (Indian School of Mines)

Dhanbad - 826004, Jharkhand, INDIA

I hereby apply for the reimbursement of Children Education Allowance/Hostel Subsidy for my child/children for the academic year \_\_\_\_\_. The relevant particulars are furnished below:-

1.	Name of the Employee	:	
2.	Employee Code	:	
3.	Designation	:	
4.	Department	:	
5.	Total CEA/ Hostel Subsidy paid	:	
6.	Total CEA/ Hostel Subsidy Claimed	:	

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

Name of the Child & Date of Birth	School in which studying and Recognized from	Class in which studying & Academic Year	Total Education Allowance paid	Total Amount of reimbursement claimed
(1)				
(2)				

8. Distance of Hostel of child from the residence of employee (in case Hostel Subsidy is claimed) :

9. The Academic year for which CEA /Hostel Subsidy is applied now:

- Whether the child for whom the CEA is applied for is a disabled child: YES/NO
- If yes, indicate the nature of disability:
- Date of disability certificate :
- Indicate the percentage of disability:

10. Whether the Bonafide certificate from Head of Institution has been attached: Yes/No

11. For Hostel Subsidy, the Bonafide certificate form mentioning the amount is attached :Yes/No

12. If Yes at Item No. 11, Amount claimed for Hostel Subsidy:.....

13. Certification-Applicable for CEA & Hostel Subsidy

- Certified that the fee/amount indicated above had actually been paid by me.
- Certified that my wife/husband is not a Central Government Servant.

- iii. Certified that my husband/wife Shri/Smt:.....is presently working as:.....in..... and 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.
- v. Certified that my child in respect of whom reimbursement of Children Education Allowance is applied is studying in the School/Institution which is recognized and affiliated to Board of Education/University.
- vi. I hereby undertake that my Son/ Daughter (Name) \_\_\_\_\_ is studying in class\_\_\_\_ (Below Class I) and I will not claim CEA for more than 2 classes prior to Class I in future.
- vii. I hereby undertake that I am not claiming CEA for third time prior to class I for my Son/ Daughter (Name) \_\_\_\_\_ who is presently studying in Class\_\_\_\_.

14. 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:

List of Enclosures: (Any one of the following may be attached)

- Certified Copy of Report Card of previous academic year **OR**
- Certificate from the Institution/School confirming completion of academic program **OR**
- Original Self-attested Fee receipts (including e-receipts) indicating fee deposited for entire academic year. (12 months)

**(FOR USE IN ACCOUNTS SECTION)**

Claim checked, verified and found correct, passed for payment of Rs.\_\_\_\_\_. Amount has been entered in the Children Education allowance register at page no\_\_\_\_\_.

Dealing Asstt. (Accts.)

Asstt. /Dy. /Jt. Registrar (F&A)

Dealing Asstt. (Audit.)

Asstt Registrar (IA&A)

Jt. Registrar (F&A)/Registrar