REIMBURSEMENT UNDER CHILDREN EDUCATION ALLOWANCE SCHEME

1. Name of Govt. Servant :

2. Designation :

3. Employees/ID Number :

4. Reimbursement claims details:

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Name of the Child/Children</th>
<th>Date of Birth</th>
<th>Name School/Institution</th>
<th>Class in which studying</th>
<th>Period (should be in academic year)</th>
<th>Amount (in Rupees)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5. (a) Whether the child for whom children Education Allowance is applied is a disabled child? Yes/No

(b) If yes, indicate the nature of disability :

(c) Indicate the percentage of disability :

(d) Date on which disability declared :

6. (a) Details of expenses incurred towards school fee/or purchase of text books & note books, uniforms & shoes and for which reimbursement under Children Education Allowance is claimed:

<table>
<thead>
<tr>
<th>Sl.</th>
<th>Description of fee paid</th>
<th>Amount (in Rupees)</th>
<th>Sl.</th>
<th>Description of fee paid</th>
<th>Amount (in Rupees)</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Tuition Fees</td>
<td></td>
<td>G</td>
<td>Laboratory Fee</td>
<td></td>
</tr>
<tr>
<td>B</td>
<td>Admission Fees</td>
<td></td>
<td>H</td>
<td>Library Fee</td>
<td></td>
</tr>
<tr>
<td>C</td>
<td>Special fee charges for Agriculture/ Electronics, music of any other subject</td>
<td></td>
<td>I</td>
<td>Fee for extra Curricular activities</td>
<td></td>
</tr>
<tr>
<td>D</td>
<td>Fee charged for practical work under the programme of work experience</td>
<td></td>
<td>J</td>
<td>Expenses incurred in purchase of one set of text books and Note books</td>
<td></td>
</tr>
<tr>
<td>E</td>
<td>Fee paid for the use of any aid or appliance by the child</td>
<td></td>
<td>K</td>
<td>Expenses incurred in purchase of two set of Uniform/Uniforms</td>
<td></td>
</tr>
<tr>
<td>F</td>
<td>Games/Sports Fee</td>
<td></td>
<td>L</td>
<td>Expenses incurred for purchase of One set of School Shoes</td>
<td></td>
</tr>
</tbody>
</table>
1. Details of cash receipt No./Counterfoil of Bank Challan/Credit voucher no./any other document (enclose original copy):

2. Certified that the child/children mentioned in respect of whom reimbursement under Children Education Allowance is being claimed is/are wholly dependent upon me and that the children education allowance mentioned against the child/each of the children has actually been paid by me.

3. Further certified that:
   i) My spouse is/is not a Central Government/State Government/PSU/Local Self Government employee and is/is not entitled to reimbursement under Children Education Allowance Scheme.
   ii) My spouse shall not claim reimbursement under children education allowance scheme or reimbursement of tuition fee, hostel subsidy etc. under any other scheme, if applicable, from his/her organization for the academic year for which reimbursement under children education allowance scheme is being claimed by me.
   iii) During the academic year covered by this claim, the child/children attended the school(s) regularly and did not absent himself/herself/themselves from the school(s) without proper leave for a period of exceeding one month.
   iv) My child/children in respect of whom reimbursement under children education allowance scheme is claimed is/are studying in the schools which is/are recognized school(s) (Not applicable to schools run by Central Government/State Government/Union Territory Administration/Municipal Corporation/Municipal Committee/Panchayat Samiti/Zilla Parishad).
   v) The particulars/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 under Children Education Allowance Scheme. 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 such disciplinary action, as deemed fit by the Competent Authority.

(Signature of the Employee)

Branch: ____________________________

Ph.No. ____________________________

Date: ____________________________