

ন্যাশনাল ইনস্টিটিউট অফ টেকনোলজি দুর্গাপুর NATIONAL INSTITUTE OF TECHNOLOGY DURGAPUR

Mahatma Gandhi Avenue, Durgapur - 713209, West Bengal, India

FORM FOR REIMBURSEMENT OF CHILDREN EDUCATION ALLOWANCE

| 1. | Certified that the Child / | Children | mentioned | below to | whom | reimbursement is | claimed, | is | /are | wholly |
|----|----------------------------|----------|-----------|----------|------|------------------|----------|----|------|--------|
| | dependent upon me:- | | | | | | | | | |

| Number | of Child / Children: - | | | | | | | |
|---|--|--|--|--|--|--|--|--|
| a. | Name of the Child : b. Date of Birth: | | | | | | | |
| C. | Class: e. Roll: | | | | | | | |
| f. | Name of the School : | | | | | | | |
| g. | Duration of the previous Academic Year : | | | | | | | |
| h. | Period from (Month) : to | | | | | | | |
| | CLAIM (Rs.) APPROVED (Rs.) | | | | | | | |
| 2. | Certified that my wife / husband is not a Central Government Servant. If yes, the She / He has not claimed and also will not claim the reimbursement of Children Education Allowance in respect of His / Her Child / Children. | | | | | | | |
| 3. | Certified that I have two children / more than two children and I will claim the reimbursement for only these | | | | | | | |
| 4. | two children. In the event of any change in the particulars above which affect my eligibility for Reimbursement of Child Education Allowance. I undertake to intimate the same promptly and also to refund excess payment, if any, made to me. | | | | | | | |
| 5. 6. | Certified that child / children have not been studying in the same class for more than two Academic Year. Certified that during the period covered by the claim the Child / Children attended the School regularly and did not absent himself / herself / themselves from the School without proper leave for a period exceeding one month. | | | | | | | |
| Datad: | Signature of the Government Servant | | | | | | | |
| Dateu. | | | | | | | | |
| | Designation: | | | | | | | |
| | Department / Section : | | | | | | | |
| | A/C No. : Employee ID No | | | | | | | |
| (FOR USE IN PERSONNEL SECTION ONLY) | | | | | | | | |
| Particulars in Col. 1 to Col. 6 are verified and found correct, as per records available in the Section. His / Her application for C.E.A. forwarded to Accounts Section and his / her claim may be settled as per rule. | | | | | | | | |
| | | | | | | | | |

Joint Registrar (Estt.)

Dealing Assistant

REGISTRAR

CERTIFICATE FROM THE HEAD OF INSTITUTION /SCHOOL

For Reimbursement of Children Education Allowance

| Ref. No.: | Date: | | | | |
|--------------------------------------|-------------------------------|--|--|--|--|
| | | | | | |
| It is certified that Master/ Kurnari | having | | | | |
| Admission No. | DOBSon/ Daughter of | | | | |
| Mr./Mrs | was studying | | | | |
| in classSec | Roll No during the previous | | | | |
| Academic year from | toSchool/Institution, | | | | |
| Namely | vide | | | | |
| affiliaüon Regd. No./Code | | | | | |
| and pattern | | | | | |
| | | | | | |
| Place:— | | | | | |
| | | | | | |
| Date:— | | | | | |
| | | | | | |
| | Signature of school Principal | | | | |