

गार्गी महाविद्यालय GARGI COLLEGE



दिल्ली विश्वविद्यालय/University of Delhi

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GC/AC/2025/

Dated: 24/02/2025

NOTICE

CHILDREN EDUCATION ALLOWANCE

It is bring to the notice of all Teaching & Non-Teaching staff members that the reimbursement form for Children Education Allowance for the financial year 2024-2025 has been uploaded on the College website.

The form must be submitted in the Accounts Department along with the required documents latest by 15/03/2025.

Prof. Sangeeta Bhatia Principal (Offg.)

PROFORMA FOR RE-IMBURSEMENT OF CHILDREN EDUCATION ALLOWANCE/HOSTEL SUBSIDY IN TERMS OF RBE No. 147/2017

CLAIM FOR THE FINANCIAL YEAR: -

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

1.	Name of the Employee	:	
2.	P.F. No./Employee No.	:	Assessment's market ball to
3.	Designation	:	
4.	Office & Bill Unit No.	:	
5.	Name of Spouse	:	CONTROL FOR UNIVERSITY OF THE PROPERTY OF THE
6.	If spouse is employed, State whether in Central Govt., PSU, State Govt. (give details)	:	compen ar blirio em part tralliciesa. Nã Militertos a litro em provincia di delitrega el
7.	Designation, Office & B.U. No. of spouse , if spouse is employed in Railway:		VIEWNOU COUNTY

8. Details of all the children of the employee:

Sl. No.	Sequence	Name	DOB	Age
1.	1st Child		tor eignplingsy attent	ides na la
2.	2 nd Child			
3.	3 rd Child			

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

Sl. No.	Sequence	Name	DOB	Age
1.				
2.		A providence of the same		Contract war

10. Academic year, Name of School/Residential School and Class in which children studied:

1 st Child	2 nd Child		
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- 11. Distance of Hostel of child from residence of employee (in case Hostel Subsidy is claimed).....
- 12. Amount of CEA/Hostel Subsidy already received up to previous quarter: ...
- 13. The Academic year for which CEA /Hostel Subsidy is applied now: ...
- 14. (a) Whether the child for whom the CEA is applied for is a disabled child: YES/NO
 - (b) If yes, indicate the nature of disability:
 - (c) Date of disability certificate.
 - (d) Indicate the percentage of disability:
- 15. Whether the Bonafide certificate from Head of Institution has been attached: Yes/No.
- 16. For Hostel Subsidy, the Bonafide certificate from mentioning the amount is attached: Yes/No

17.	If Yes at Item No. 16, Amount claimed for Hostel Subsidy:	
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18. (i) Certified that the fee/amount indicate above had actually been paid by me.

for the Children Education Allowance for the child mentioned above.

- (ii)Certified that my wife/husband is/is not a Central Government Servant.
- (iii)Certified that my husband/wife Sri/Smt:..... is presently working

as : inand that he/she shall not apply/has not applied

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

17 Certified that my child in respect of whom reimbursement of Children Education Allowance is applied is studying in the School/Jr. College which is recognized and affiliated to Board of Education/University.

18. 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 & Station

Working Under:

Date:

The family composition of the claimant has been verified from the official records such as Pass Declaration/Register etc and found correct.

Date:

Signature of Sr. Subordinate With office seal and stamp

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SI. No.	Name of staff	P.F.No.	CEA Amount	Hostel Subisdy Amount if any	Total
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Forwarded to: Sr.DFM/CKP for vetting and early return.

BONAFIDE CERTIFICATE FROM THE HEAD OF INSTITUTION/SCHOOL
This is to certify that Master/Baby/Mr./Miss Rol
no
Sri/Smt is a bonafide student of this school and studied
in Class during the financial year and as per School records his/he
date of birth is in words
This is to also certify that the above named child had studied in this school in the
previous academic year
He/She bears a good moral character.
** During the year Master/Baby/Mr./Miss had resided in
the residential complex (Hostel) of the school and paid an amount of Rs toward
boarding and lodging in the residential complex.
This Institution/School is affiliated recognized by
and the affiliation/recognition Number
is

Dated:

Place:

Signature Head of the Institution/School (with Stamp and seal)

^{**(}Strike out it is not applicable)