

Maulana Azad
National Institute of Technology, Bhopal (M.P.) - 462003

No.AB/2019/ 1160

Date: 25 /10/2019

CIRCULAR

Revised allowances (including Child Education Allowance) were made applicable to the Institute w.e.f. 01.07.2017 vide MHRD corrigendum letter No.15-4/2017-TC dated 1st February, 2019, by that date the Children Education Allowance claims for assessments year 2017-2018 were already settled at pre-revised rates.

Institute employee may lodge supplementary claim in enclosed proforma for claiming the difference amount, if any, between pre and post revised Children Education Allowance for the academic year 2017-2018.


Registrar

Copy to:

- (1) All Deans
- (2) All HoDs/Sectional Heads
- (3) PA to Registrar
- (4) PA to Director for kind information of the Director
- (5) In-charge Institute website for upload in the section of circular/not

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SUPPLEMENTARY CLAIM FOR CHILDREN EDUCATION ALLOWANCE
CLAIM FOR THE ACADEMIC YEAR 2017-2018 AND/OR 2018-2019

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

1	Name of Employee				
2	Employee ID				
3	Designation				
4	Department/Section				
5	Name of the recognized School & Class				
6	If Spouse is employed. Yes/No. If Yes, state whether in Central Govt., PSU state Govt. (Give details with name of the Spouse)				
7	Details of the child/children for whom CEA claimed :-				
	Sequence	Name of child	Year	Amount Claimed (In previous Years)	Balance amount Claimed
	1 st Child		2017-18		
	1 st Child		2018-19		
	2 nd Child		2017-18		
	2 nd Child		2018-19		
	Total				

1. 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.
2. Certified 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 any stage the information/documents furnished above is found to be false, I am liable for disciplinary action.

Date :

(Signature of Employee)

Place:

Name.....

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SELF DECLARATION

I _____ Designation _____ of
Deptt/Sec _____ Do hereby certify that my Son/Daughter namely
Master/Ms. _____ studied in Class _____ Sec _____
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 the claimant

Name.....

Place: _____

Date: _____