

**SOUTH EASTERN RAILWAY**

**Application for Children Education Allowance (CEA) for the Academic Year 20\_\_ — 20\_\_.**

[Ref: Rly Board's Letter No. E (W 2017/ED-2/3 Dated 12/10/2017 (RBE No. 147/2017) - S.E.R's E/S No. 169/17 ]

01	Name of the Employee		
02	Department /Office		
03	Employee No. & Design.		
04	Shop/Tkt. No. Pay Bill Unit No.		
05	<b>PARTICULARS OF CHILDREN</b>	<b>CHILD -1</b>	<b>CHILD -2</b>
i)	Name of the student		
ii)	Date of Birth & Class		
iii)	Name of the School and Address		
iv)	Nature of Claim : ( Tick whichever is applicable )	Education Allowance/ Hostel Subsidy/ Disabled Child	Education Allowance/ Hostel Subsidy/ Disabled Child
06	Whether Bonafide Certificate from Institution is enclosed/ whether originalvoucher in enclosed.		
07	<u>Hostel Subsidy</u> Whether Bonafide Certificate from Institution mentioning the amount of expenditure is enclosed.		

( School Certificate form in attached herewith as Annexure - 'B' )

**Certified that:**

- My child/children mentioned above in respect of whom reimbursement of education expenses are claimed is/are wholly depended upon me.
- My wife/husband is not a Central Govt. Employee and that she/he will not claim reimbursement of education expenses in respect of our child/children.
- My child/children in respect of whom reimbursement is claimed is/are studying in recognized School/ Institution .
- I hereby declare that reimbursement of Children Education Allowance has not been claimed in respect of the child /children by a person other than me.

I hereby declare that the particulars mentioned above are correct to the best of my knowledge. If any information furnished above is not correct, I am liable to be taken up under D & AR.

**Signature of forwarding officer**  
(Date & office seal)

**Signature of the Applicant :** \_\_\_\_\_

**Name of Applicant :** \_\_\_\_\_

**Employment Number :** \_\_\_\_\_

**BONAFIDE CERTIFICATE FROM HEAD OF INSTITUTION / SCHOOL**

This is to certify that Master/ Baby/ Mr./ Miss \_\_\_\_\_, ID No./ Roll No./ Admission No. \_\_\_\_\_ Son / daughter of Sri/Smt \_\_\_\_\_ is a bonafide student of this school, and studied in Class \_\_\_\_\_ during the financial Year 20\_\_–20\_\_ [Period : 1<sup>st</sup> April, \_\_\_\_ to 31<sup>st</sup> March, \_\_\_\_] and As per School records, his/her Date of Birth is \_\_\_\_\_ [ (In Words) \_\_\_\_\_].

He/ She bears, a good moral character.

During the Academic Year \_\_\_\_\_ [Period \_\_\_\_\_], Master/ Baby/ Mr./ Miss \_\_\_\_\_, I.D. No./ Roll No./Admission No. \_\_\_\_\_, son/ daughter of Sri/Smt \_\_\_\_\_ had resided in the residential complex (Hostel) of the school, and paid an amount of Rs \_\_\_\_\_ [Rupee \_\_\_\_\_] per month / per annum towards Boarding & Lodging in the residential hostel complex.

The Institution is affiliated / recognized by \_\_\_\_\_ and the Affiliation / Recognition number is \_\_\_\_\_.

**Dated :** \_\_\_\_/\_\_\_\_/20

**Place :** \_\_\_\_\_

**Signature of Head of Institution  
(With Stamp and Seal)**

\*\* (Strike out it is not applicable)