



# NATIONAL MUSEUM INSTITUTE

OF HISTORY OF ART, CONSERVATION AND MUSEOLOGY

(Deemed to be University)

National Museum Campus, Janpath, New Delhi-110011

**Annexure 'A'**

**RE-IMBURSEMENT OF CHILDREN EDUCATION ALLOWANCE/HOSTEL SUBSIDY**

**CLAIM FOR THE FINANCIAL YEAR: - 20.....-20.....**

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

- 01. Name of the Employee : .....
- 02. Designation : .....
- 03. Department : .....
- 04. Details of all children of the employee:

Sr.No.	Sequence	Name of Children	DOB	Age
01.	1 <sup>st</sup> Child			
02.	2 <sup>nd</sup> Child			
03.	3 <sup>rd</sup> Child			

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

Sr.No.	Sequence	Name of Children	School Name	Class in which studied	DOB	Age

- 06. Distance of Hostel of child from residence of employee (in case Hostel Subsidy is claimed) : ..... Kms.
- 07. Amount of CEA/Hostel Subsidy already received up to previous quarter: .....
- 08. The Academic year for which CEA /Hostel Subsidy is applied now: ..
- 09. (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. : ...../...../20..... (Enclosed Certificate)  
 (d) Indicate the percentage of disability: .....
- 10. Whether the Bonafide certificate from Head of Institution has been attached : Yes/No.
- 11. For Hostel Subsidy, the Bonafide certificate mentioning the amount is attached: Yes/No
- 12. If Yes at Item No. 11, Amount claimed for Hostel Subsidy:.....
- 13. (i) Certified that my wife/husband is/is not a Central Government Servant.  
 (ii) Certified that my husband/wife Sri/Smt:..... is presently working as : ..... in .....and that he/she shall not apply/has not applied for the Children Education Allowance for the child mentioned above.  
 (iii) Certified that I or my wife/husband has not claimed this re-imburement from any other source and will not claim the same in future.

The information furnished above are complete and correct and I have not suppressed any relevant information. I am aware that if at any stage the information/documents furnished above is found to be false, I am liable for disciplinary action.

Date :.....  
Place : .....

Signature of employee  
Name: .....



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Annexure 'B'

## BONAFIDE CERTIFICATE FROM THE HEAD OF INSTITUTION/SCHOOL

This is to certify that Master/Baby/Mr./Miss ..... Roll No .....  
Admission No..... Son/Daughter of Mr./Ms. .... is a  
bonafide student of this school and studied in Class..... during the Academic year  
..... and as per School records his/her date of birth is .....

This is to also certify that the above named child had studied in this school in the  
academic year.....

\*\*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)