



केन्द्रीय प्रौद्योगिकी संस्थान कोकराझार
CENTRAL INSTITUTE OF TECHNOLOGY KOKRAJHAR

Deemed to be University, MHRD, Govt. of India
Kokrajhar, BTAD, Assam 783370

www.cit.ac.in

No. CIT\Acctts\Circular-Order\2020\385\+126 1194

Date: 17-01-2020

Circular

Sub: Cut-off date for submission of claim for Children Education Allowance (CEA)\Hostel Subsidy.

In view of closing of the current Financial Year 2019-20, all are requested to comply the following cut off dates for submission of claim on Children Education Allowance (CEA)\Hostel Subsidy for only **Academic Year 2019-20** to the Accounts Section of the Institute.

Cut-off date for submission claim for Children Education Allowance (CEA)\Hostel Subsidy is 28-01-2020.

All are requested to comply with the above date in order to enable the Accounts Section to close the books of Accounts within time.

Ms. Chaitali Brahma

Registrar

Central Institute of Technology, Kokrajhar

E-,mail: registrar@cit.ac.in

Copy to for information:

1. The Establishment Section, Central Institute of Technology Kokrajhar
2. The Accounts Section, Central Institute of Technology Kokrajhar

BONAFIDE CERTIFICATE FROM THE HEAD OF INSTITUTION/SCHOOL

This is to certify that Master/Baby/Mr./Miss Roll no.....
Admission No..... son of Sri/Smt..... is a bonafide
student of this school and studied in Class..... during the financial year and
as per School records his/her 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)



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Annexure 'A'

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

CLAIM FOR THE ACADEMIC YEAR : 2019-2020.

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

A.

1.	Name of the Employee	:	
2.	Employee No.	:	
3.	Designation	:	
4.	Department/Section	:	
5.	Name of Spouse	:	
6.	If spouse is employed, State whether in Central Govt., PSU, State Govt. (give details)	:	
7.	Designation, Office & B.U. No. of spouse , if spouse is employed:		

B. Details of all the children for whom CEA claimed:

Sl. No.	Sequence	Name	DOB/Age	Class	Name of School
1.	1 st Child				
2.	2 nd Child				

C. Details of all the children for whom Hostel Subsidy claimed:

Sl. No.	Sequence	Name	DOB/Age	Class	Name of School
1.	1 st Child				
2.	2 nd Child				

Contd..P/2



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D. Distance of Hostel of child from residence of employee (in case Hostel Subsidy is claimed) : Kms.

E. Amount of CEA/Hostel Subsidy already received up to previous Year: Rs.

F. (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:

G. Whether the Bonafide certificate from Head of Institution has been attached : Yes/No.

H. For Hostel Subsidy, the Bonafide certificate from mentioning the amount is attached: Yes/No

I. If Yes at **Item No. H**, Amount claimed for Hostel Subsidy:.....

J. (i) Certified that the fee/amount indicate above had actually been paid by me.

(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 : in and
that he/she shall not apply/has not applied for the Children Education Allowance for the child
mentioned above.

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

K. 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.

L. 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 :



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Sl. No.	Name of staff	Employee No.	CEA Amount	Hostel Subsidy Amount if any	Total (Rs.)

(Total rupees in words :)

Forwarded to : Sr. Accountant for vetting and early disbursement.

A.R. Fin
CIT Kokrajhar

Registrar,
CIT Kokrajhar