



**SARDAR VALLABHBHAI NATIONAL INSTITUTE OF TECHNOLOGY, SURAT**  
**APPLICATION FOR CHILDREN EDUCATION ALLOWANCE (CEA) /**  
**HOSTEL SUBSIDY (HS)**

(Ref. DoPT OM No.A-27012/02/2017-Estt. (AL) dated 17<sup>th</sup> July 2018)

<b>S. No</b>	<b>Claim for the Academic year for which CEA /Hostel Subsidy is applied: _____</b>			
01	<b>Name of the Employee</b>			
02	<b>Employee No. &amp; Designation</b>			
03	<b>Department / Section</b>			
04	<b>Details of earlier claims (period upto which claims already taken)</b>			
05	<b>PARTICULARS OF CHILDREN</b>	<b>1<sup>st</sup> Child</b>	<b>2<sup>nd</sup> Child</b>	<b>3<sup>rd</sup> Child #</b>
i)	Name of the Children/Student			
ii)	Date of Birth			
iii)	Age			
iv)	Class			
v)	Academic Year			
vi)	Name of the School			
vii)	Address of the School			
06	<b>Nature of Claim (Tick whichever is applicable)</b>			
i)	Education Allowance (CEA)	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>
ii)	Hostel Subsidy® (Pl also mention amount of claim for this column)	Yes <input type="checkbox"/> / No <input type="checkbox"/> Rs. _____	Yes <input type="checkbox"/> / No <input type="checkbox"/> Rs. _____	Yes <input type="checkbox"/> / No <input type="checkbox"/> Rs. _____
iii)	Divyang Child (if yes, enclose the proof of certificate)	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>
07	<b>Enclosure(s) for CEA:</b> (a) Bonafide Certificate from Head of the School/Institute or (b) Self-attested final Report card or (c) Self-attested fee receipts	If 6(i) is Yes, pl. tick whoever is applicable  <input type="checkbox"/> (a); <input type="checkbox"/> (b); <input type="checkbox"/> (c)	If 6(i) is Yes, pl. tick whoever is applicable  <input type="checkbox"/> (a); <input type="checkbox"/> (b); <input type="checkbox"/> (c)	If 6(i) is Yes, pl. tick whoever is applicable  <input type="checkbox"/> (a); <input type="checkbox"/> (b); <input type="checkbox"/> (c)
08	<b>Enclosure(s) for Hostel Subsidy:</b> (a) Bonafide Certificate from school mentioning the amount of expenditure towards lodging and boarding or (b) Self-attested copy of the report card and original fee receipt(s)/e-receipt(s)	If 6(ii) is Yes, pl. tick whoever is applicable  <input type="checkbox"/> (a); <input type="checkbox"/> (b)	If 6(ii) is Yes, pl. tick whoever is applicable  <input type="checkbox"/> (a); <input type="checkbox"/> (b)	If 6(ii) is Yes, pl. tick whoever is applicable  <input type="checkbox"/> (a); <input type="checkbox"/> (b)
09	Distance of Hostel of child from residence of employee (in case Hostel Subsidy is claimed.			

10 (a)	Whether the child for whom the CEA is applied for is a disabled child.	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>	Yes <input type="checkbox"/> / No <input type="checkbox"/>
(b)	If Yes, indicate the nature of disability			
(c)	Date of disability certificate			
(d)	Indicate the percentage of disability.			
11	<b>Amount claimed (Rs.) :</b> - CEA - Hostel Subsidy			
12	<b>Total amount claimed (Rupees)</b>			

Encl: \_\_\_\_\_

**Signature of the Claimant/Employee**

- # in case the second child birth results in twins/multiple birth.  
 @ Applicable only in respect of the Child studying in a residential education institution located at least 50KM away from the residence of the employee.

**Certified that**

1. My child/ children in respect of whom re-imbursement of CEA/ Hostel subsidy is claimed, is/are studying in the School/Jr. College which is recognized and affiliated to Board of Education/ University/ Govt and wholly depended upon me.
2. My spouse is not an employee of Central Govt./State Govt./Autonomous/PSU organization OR My spouse is an employee of Central Govt./State Govt./ Autonomous/PSU organization and not claim reimbursement of any Educational expenses in respect of our Children from his/her employer.
3. I am claiming the CEA/ Hostel Subsidy in respect of my two/ three# (as the case maybe) eldest surviving children only. The same has not been claimed by a person other than me.

I hereby declare that the information furnished above are complete and correct, 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 CEA/Hostel Subsidy, I undertake to intimate the same promptly and also to refund excess payments if any made to me. 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.

Date: \_\_\_\_\_

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

Signature of the Employee \_\_\_\_\_  
 Name: \_\_\_\_\_

**General Instruction:**

1. The amount fixed for reimbursement of Children Education Allowance will be Rs. 2812.50/- pm., and Rs. 8437.50/- pm for Hostel Subsidy.
2. The CEA will be double the normal rates for Divyang Children i.e. Rs. 5625/-
3. The reimbursement will be done just once a year, after completion of financial year only.
4. For CEA Employee should produce

A certificate issued by the Head of the Institute for the period/year for which claim has been preferred. The certificate should confirm that the child studied in the School during previous academic year and should bear the registration number of the School.

Or

Self-attested copy of the report card having the particulars of the School

Or

Self-attested fee receipt(s) (including e-receipts(s)) in original for entire academic year having the particulars of the School.



5. The expenditure on boarding and lodging or the ceiling of Rs. 8437.50/-, whichever is lower, shall be paid as Hostel Subsidy and the employee should produce

A certificate from the Head of the Institute confirming that the Child studied in the school in the previous academic year along with the amount of expenditure incurred by the employee towards lodging and boarding in the residential complex.

Or

Self-attested copy of the report card and original fee receipt(s)/e-receipt(s) which should indicate the amount of expenditure incurred towards lodging and boarding in the residential complex for the period.

\*Hostel subsidy is applicable only in respect of the Child studying in a residential education institution located at least 50 KM from the residence of the employee.

6. The CEA and Hostel Subsidy is admissible in respect of Children studying from three classes before class one to 12<sup>th</sup>/10+2 standard or till the child attain the age of 20 years, whichever is earlier. For Divyang Children the upper age limit will be 22 years.
7. The deadline for submission of application is 7<sup>th</sup> March, 2025 of the Academic Year 2024-25 with all certificates to Deputy Registrar (Establishment).
8. Claim will not be considered in absence of any required document(s)

**Note: The period/year means – twelve (12) months of complete academic session.**

**[To be submitted to the Establishment Section for Office Use]**

The forwarded application and the names of Child/Children furnished by the employee Mr./Ms./Dr \_\_\_\_\_ are duly verified with the records maintained in this section and it is certified that he/she/they is/are the single/eldest two surviving child/children declared by the employee.

Remarks, if any:

Dealing Asst.

Superintendent

Deputy Registrar (Estt.)

**[To be submitted to the Accounts Section for Office Use]**

Remarks, if any:

Passed for

Admissible amount to be reimbursed under Children Edu. Allow.

Admissible amount to be reimbursed under Hostel Subsidy

Total

(Total Rupees. \_\_\_\_\_)

Dealing Assistant

Checked by

Superintendent

AR / DR (A/cs)

Registrar

Dean (SW)/ Director

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

This is to certify that Master / Baby / Mr. / Miss. .... Roll  
No. .... Admission No. .... Son/Daughter of Shri / 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.....  
towards boarding and lodging in the residential complex.

This Institution / School is affiliated recognized by.....  
..... and the affiliation / recognition  
Number is .....

Date:

Place:

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

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