

त्रिपुरा विश्वविद्यालय

TRIPURA UNIVERSITY

(केन्द्रीय विश्वविद्यालय / A Central University)

सूर्यमणिनगर, अगरतला / Suryamaninagar, Agartala

त्रिपुरा(प.)/Tripura(W.), पिन/PIN – 799022, भारत/INDIA



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No.F.TU/FIN/MRC/181/2015

Date: - 17/06/2019

NOTIFICATION

This is hereby notified for information of all concerned that consequent upon the decision taken by the Government on the recommendations made by the Seventh Central Pay Commission on the subject of Children Education Allowance/Hostel Subsidy, the following instructions are being issued in supersession of earlier notification as per guidelines & letter issued by UGC vide letter F.No.11-1/2017(CU) dated 07 May 2019.

- (a) The amount fixed for reimbursement of Children Education Allowance will be Rs.2250/- pm.
- (b) The amount fixed for reimbursement of Hostel Subsidy will be Rs.6750/-pm.
- (c) In case both the spouses are Government servants only one of them can avail reimbursements under Children Education Allowance.

2. Further, reimbursement will be done just once a year, after completion of the financial year. For reimbursement of CEA, a certificate from the Head of Institution, where the ward of government employee studies, will be sufficient for this purpose. The certificate should confirm that the child studies in the school during the previous academic year. For Hostel Subsidy, a similar certificate from the Head of Institution will suffice, with the additional requirement that the certificate should mention the amount of expenditure incurred by the government servant towards lodging and boarding in the residential complex. The amount of expenditure mentioned, or the ceiling as mentioned above, whichever is lower, shall be paid to the employee.

New format for claiming Children Education Allowance/Hostel Subsidy shall be available in Tripura University website .www.tripurauniv.in/www.tripurauniv.ac.in

These orders shall be effective from 1st July 2017.

This is issued with approval by the Hon'ble Vice-Chancellor, Tripura University.


(U.K. Das)
FINANCE OFFICER

Copy forwarded for information & necessary action to:-

1. The Dean, Faculty of Arts & Commerce, Tripura University.
2. The Dean, Faculty of Science, Tripura University.
3. The Registrar, Tripura University.
4. The Controller of Examinations, Tripura University
5. The Director of College Development Council, Tripura University.
6. The Librarian, Tripura University.
7. The Head, Deptt. of _____ T.U.
8. The P.S. to the Vice-Chancellor, T.U.

FINANCE OFFICER.



TRIPURA UNIVERSITY
(A Central University)
Suryamaninagar – 799022

CHILDREN EDUCATION ALLOWANCE / HOSTEL SUBSIDY CLAIM FORM

CLAIM FOR THE FINANCIAL YEAR: -

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

1.	Name of the Employee	:	
2.	Designation	:	
3.	Office / Deptt. / Branch / Section	:	
4.	Name of Spouse	:	
5.	If spouse is employed, State whether in Central Govt., PSU, State Govt. (give details)	:	
6.	Designation & Office of spouse , if spouse is employed in Railway:	:	

7. Details of all the children of the employee:

Sl. No.	Sequence	Name	DOB	Age
1.	1 st Child			
2.	2 nd Child			
3.	3 rd Child			

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

Sl. No.	Sequence	Name	DOB	Age
1.				
2.				

9. Academic year, Name of School / Residential School and Class in which children studied:

	1 st Child	2 nd Child
Academic Year		
Name of School		
Class		

10. Distance of Hostel of child from residence of employee (in case Hostel Subsidy is claimed):.....
11. Amount of CEA/Hostel Subsidy already received up to previous quarter :.....
12. The Academic year for which CEA /Hostel Subsidy is applied now :.....
13. (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 :
14. Whether the Bonafide certificate from Head of Institution has been attached : Yes/No
15. For Hostel Subsidy, the Bonafide certificate from mentioning the amount is attached : Yes/No
16. If Yes at Item No.15, Amount claimed for Hostel Subsidy :
17. (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-imburement from any other source and will not claim the same in future.
18. 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.
19. 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 of the Employee :

Name (in full) :

Designation :

Branch/Deptt./Section :

Date :

FOR OFFICE USE ONLY

Sl. No.	Name of staff	Designation	CEA Amount	Hostel Subsidy Amount if any	Total

Bill Clerk/OS

Bill Compiling Officer

BONAFIDE CERTIFICATE FROM THE HEAD OF INSTITUTION / SCHOOL

This is to certify that Master/Baby/Mr./Miss
Roll no..... Admission No..... son/daughter 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

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)