To

S.D.O (AH&D)

……………………………………………. (Distt……………………………..…)

**Subject: - Claim for Education Allowance**

Claim is submitted to grant education allowance to me in the compliance of Haryana Government vide F.D. Haryana Chandigarh Notification No. 4/5/2009-5FR dated 18-06-2009 & modified vide F.D. Haryana Chandigarh order No. 4/5/2009-5FR dated 23-8-2010.

The reimbursement Education allowance of school going two children only class Nursery to Twelfth (10+2) level as Rs. 1125/-per Month Per child.

The expenditure will be met out under the Head of account ”2403" AH&D.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name of Employee | | | | Employee ID No. | |
| Designation | | | | Name of Office with Code | |
| Sr. No. | | Particulars | 1st Child | | 2nd Child |
| i | | Name of Student |  | |  |
| ii | | Class |  | |  |
| iii | | Name of School |  | |  |
| iv | | Date of Birth |  | |  |
| v | | Period of Claim  Amount of Claim for  Education allowance |  | |  |
|  | |  |
| Total | | | Rs…………………………………… | | Rs…………………………………… |
| **Grand Total** | | | | | Rs…………………………………… |
|  | In Words……………………………………………………………………………………………………………………….. | | | | |

**Signature**

**Verified: -**

(1) It is certified that above information given by me is true & correct. Nothing is concealed. I will fully responsible for this claim and certified that my child/ children mentioned at Sr. No. o. (i) of the table in respect of whom reimbursement is claimed is/are studying in the school as mentioned at Sr. No. (iii) of the table in and the reimbursement claimed at Sr. No. (v) of table have actually been paid by me.

(2) (i) My wife /Husband is not a Government Servant.

(ii) My wife / Husband is in Govt. Service and No reimbursement would be claimed by Her/ Him.

(iii) My Wife /Husband is employed with ……………………………She / He is not entitled to reimbursement mentioned at Sr. No. (v) of the table.

**Verified by: -**

|  |  |
| --- | --- |
| **Incharge** | **Signature**  **Name & Designation** |