REIMBURSEMENT OF TUITION FEE

Certified that the child/children mentioned below in respect of whom reimbursement of tuition fee is claimed is/are wholly dependent upon me:

Name of the Child	Date of Birth	School in Which studying	Class in Which studying	Monthly tuition fee actually payable	Tuition fee actual paid from	Amount of reimbursement claimed
(1)	(2)	(3)	(4)	(5)	(6)	(7)

2.   Certified that the tuition fees indicated against the child/each of the children had actually been paid by me (Cash receipt/counterfoil of the bank credit vouchers to be attached with the initial claim).

3.   Certified that:-

(i)   My wife/husband is/is not a Central Government servant.

(ii)   My wife/husband is/is not a Central Government servant but she/he will claim reimbursement of tuition fee in respect of our child/children.

(iv)   My   wife/husband   is   employed   with
....
she/he is/is not entitled to reimbursement of tuition fees in respect of our child/children.

4.   Certified that during the period covered by this claim, the child/children attended the school (s) regularly and did not absent himself/herself themselves from the school (s) without proper leave for a period exceeding one month.

5.   Certified that the child/children mentioned has/have not been studying in the same class for more than two years.

6.   Certified that I of my wife/husband have/has not claimed and will not claim the children's educational allowance in respect of the children mentioned above.

7.   Certified that my child/children in respect of whom reimbursement is claimed is/are studying in the schools are which is/are recognized school (s) (Not applicable to schools run by Central Government/State Govt./Union Territory Administration/Municipal Commission/Panchayat Samiti/Zilla Parishad).

8.   In the event of any change in the particular above which effect my eligibility for reimbursement of tuition fees. I undertake to intimate the same promptly and also to refund excess payments, if any made.

(SIGNATURE OF THE GOVT. SERVANT)

Dated:-   NAME IN BLOCK LETTERS _ _ _ _ _ _ _ _

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DESIGNATION _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _

I. D. NO. _