C.No. II/39/1/2018-Accts. Date: 18.01.2018

CIRCULAR

<table>
<thead>
<tr>
<th>Sl.No</th>
<th>Letter No.</th>
<th>Subject</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Letter No. No.A-27012/02/2017-Estt.(AL) 16 August, 2017 (This Order shall be effective from 1st July, 2017)</td>
<td>Childrens Education Allowance</td>
</tr>
</tbody>
</table>

Kindly note that academic year shall be April- March for Kendriya Vidyalaya and June -May for other institutions. The claim for 2017-2018 shall be regulated accordingly partly as per old rates and new rates from 01.07.2017.

Copy of the above mentioned letter may be downloaded from the web site www.cenexcisekochi.gov.in for the information please.

(N.S. DEV)
Asst. Commr./Chief Accounts Officer

Copy to
All AC/DCs in charge of Divisions
The Superintendent (EDP) for uploading to the Office web site Notice Board
Authority vide Government of India
Ministry of Personnel, P.G. and Pension Department of Personnel & Training New Delhi,
(This order shall be effective from 1st July, 2017)

CERTIFICATE FROM THE HEAD OF INSTITUTION/SCHOOL
(for reimbursement of CEA)

Ref. No. Date:

It is certified that Master/Kumari..................................having
Admission No ......................D.O.B..................................Son/Daughter
of Mr/Mrs..............................................was
studying in class..................Section............Roll No..................during
the previous academic year from.............to...............School/
Institution,namely...........................................................
vide affiliation Regd. No./Code...............and Pattern...................
........Curriculum.

Place:-
Date:-

Signature of Principal
(Affix School Stamp)
SELF- DECLARATION

I ..................................................(Designation).................................................. of Office of the ..........................................................do hereby certify that my Son/Daughter Namely ...........................................had studied in class..............sec..............during the previous academic year..............in ..............School.

In the event of any change in the particulars given above which offset my eligibility for childrens education allowance, I undertake to intimate the same promptly and refund excess payment if any made to me.

Place:- .......................................................... Signature:
Date:- ..........................................................

Name:
Designation:
Section: