

## FORM – 2

### REIMBURSEMENT OF TUTION FEE

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

Name of the Child	Date of Birth	School/ Class in which Studying	Monthly tution fee Actually Payable	Tution fee Actually paid from July 20..... Feb. 20..... <hr style="width: 50%; margin: 0 auto;"/> March 20 .... To June 20.....	Amount of Reimbursement claimed
1.	2.	3.	4.	5.	6.

2. Certified that the tution fee indicated against the child/ each of the children actually been paid by me (cash receipt/ counter foil of the Bank Credit Vouchers to be attached with the initial claim.)

3. Certified that :

(a) My wife / husband is not a Central Govt. Servant.

(b) My wife/ husband is a Central Govt. Servant but she/ he will not claim reimbursement of tution fee in respect of our child/ children.

(c) My wife/ husband is employed with \_\_\_\_\_ she / he is/ is not entitled to reimbursement to tution fee 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 the period of exceeding one month.

\_\_\_\_\_ school/ college

(Name and Location of the Institution)

Certified that Shri/ Kumari \_\_\_\_\_ Son/ Daughter of Shri/Smt. \_\_\_\_\_ passed out from class \_\_\_\_\_ in \_\_\_\_\_. He / She had paid tution fees for the period from \_\_\_\_\_ to \_\_\_\_\_ as per details given below:

Tution Fees :

Science Fees :

Music Fees :

\_\_\_\_\_ :

\_\_\_\_\_ :

○ Certified that Sh./ Km. \_\_\_\_\_ is at present a student of class \_\_\_\_\_ and has paid tuition fees for the period from \_\_\_\_\_ To \_\_\_\_\_ as per details given below:-

1. Tuition Fees :
2. Science Fees :
3. Music Fees :
4. \_\_\_\_\_ :
5. \_\_\_\_\_ :

Certified that this is a school/ college run by Central Government / State Government / Union Territory Administration/ Municipal Corporation/ Municipal Committee/ Panchayat Samiti / Zilla Parishad.

Certified that this is school/ college recognized by the education authorities of \_\_\_\_\_ State/ Union Territory Administration.

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

Principal/ Head master/Head.....  
(Stamp of the Institution)

○ Strike out whatever is not applicable

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 or 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 of tuition fee is claimed is/ are studying in the schools which is/ are recognized school (s) not applicable to schools run by Central Government / State Government / Union Territory Administration/ Municipal Corporation/ Municipal Committee/ Panchayat Samiti / Zilla Parishad.
8. In the event of any change in the particulars above which affect 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)

Name in Block Letters \_\_\_\_\_

Designation \_\_\_\_\_

Office \_\_\_\_\_

Dated : \_\_\_\_\_

○ (Strike out which is not applicable)

X employer other than Central Govt. to be mentioned.