South Eastern Railway

Office of the Sr. Divl. Personnel Officer Chakradharpur Dated: 08.02.2018

No. SER/P-CKP/IPAS/CEA/7th CPC/18

To, All Concerned of CKP Division.

Sub: Guidelines for Payment of Children Education Allowance as per 7th CPC.

Ref: 1) Rly Board's letter No. E(W) 2008/ED-2/4 Dated-01.10.2008.

2) Rly Board's letter No. E(W) 2017/ED-2/3 Dated-12.10.2017.

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In terms of RBE No. 147/2017 circulated vide Railway Board's letter No. E(W) 2017/ED-2/3 Dated-12.10.2017, the mode of application and payment/re-imbursement of Children education allowance has been modified. Accordingly, it has decided to adopt the following procedure as per new methodology for payment of CEA re-imbursement as under:

I) <u>Application Procedure:</u>

- 1) The amount fixed for re-imbursement of CEA shall be Rs.2250 PM and Rs.6750 PM for Hostel subsidy w.e.f 01.07.2017 onwards.
- 2) The above allowance will be double for Disabled children.
- 3) The application for re-imbursement shall be done after the completion of the every financial year i.e. application for FY 2017-18 will be made on or after 01.04.2018. Format of application is enclosed at Annexure 'A'.
- 4) The application for re-imbursement shall contain a bonafide Certificate from the Head of Institution, where the ward of government employees studies, will be sufficient for this purpose. The certificate should confirm that the child studied in the school during the previous academic year. Format of application is enclosed at Annexure 'B'.
- 5) The Bonafide certificate to ensure that the child has studied in the school in that Financial year should be issued as per the prescribed format only and that may or may not be necessarily in the School Letter Head.
- 6) Similarly for claiming Hostel Subsidy, a certificate from Head of Institution will suffice, with additional requirement that the certificate should mention the amount of expenditure incurred by the government servant towards lodging and boarding in the residential complex. So that the amount of expenditure incurred, or the ceiling as mentioned above, whichever is lower shall be paid to the employee.
- 7) If the both the Spouses are Government employee, the applicant should declare his/her spouse has not claimed the allowance, and will be liable to be taken under D&AR if it is found to be false at later date.
- 8) All other eligibility criteria's, terms & conditions as given by Railway Board time-to-time shall remain in force for re-imbursement of CEA.

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II) Schedule of Payment and forwarding of application:

- 1) The complete application alongwith all necessary enclosures should reach Sr.DPO's office or Bill Compiling Unit by 10th May of every next financial year i.e. application for claims of 2017-18 should be submitted by 10.05.2018.
- 2) The CEA claims shall be eligible for the first two (02) surviving children whose name are included in the Family composition i.e. Pass declaration & register, Form-6 of the employee and in IPAS family details also. Before submitting an application for CEA, the concerned employee should ensure that his/her child's name is included in the family composition records available with 'P' Branch or Unit. The Bill dealer should also ensure that the entire family composition of the claimant has been entered in the IPAS family details modules.
- 3) The applications as received from the Units, the respective Bill dealers will scrutinize the application and make necessary entries in IPAS CEA module by 10th June of every year and forward the same to associated Accounts for vetting and similarly accounts will vet the CEA by 10th July of the year.
- 4) The vetted CEA shall be uploaded in Pay Roll system in the salary payment for the month of <u>July of</u> the year. If sufficient funds are not available, the payment shall be in the consequent month whenever the funds are available.
- 5) Belated application shall be processed separately for arranging payment in the subsequent months.
- 6) It would be the primary responsibility of the Unit In-charge/Supervisor to collect the CEA applications alongwith necessary Bonafide certificates and Hostel subsidy receipts from the employees under their control and forward the same to Sr.DPO's office or Bill compiling unit by 10th May duly certifying the family composition details available in Pass declaration/register. The all consolidated CEA applications shall be accepted only with proper forwarding/covering letter and the applications should not be forwarded in piece meal manner.

NB: The CEA & Hostel subsidy claims from April-17 to June-17 shall payable at the old rates as per 6^{th} CPC and new rates of 7^{th} CPC shall be applicable from July-17 onwards.

This has the approval of Sr.DPO/CKP and Sr.DFM/CKP.

Encl: As stated.

Asstt. Personnel Officer For Sr. Divl. Personnel Officer Chakradharpur

PROFORMA FOR RE-IMBURSEMENT OF CHILDREN EDUCATION ALLOWANCE/HOSTEL SUBSIDY IN TERMS OF RBE No. 147/2017

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.	P.F. No./Employee No.	:	
3.	Designation	:	
4.	Office & Bill Unit No.	:	
5.	Name of Spouse	:	
6.	If spouse is employed, State whether in Central	:	
	Govt., PSU, State Govt. (give details)		
7.	Designation, Office & B.U. No. of spouse , if		,
	spouse is employed in Railway:		

8. Details of all the children of the employee as per Pass Declaration:

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

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

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

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

1 st Child	2 nd Child

- 11. Distance of Hostel of child from residence of employee (in case Hostel Subsidy is claimed)......
- 12. Amount of CEA/Hostel Subsidy already received up to previous quarter:
- 13. The Academic year for which CEA /Hostel Subsidy is applied now: ...
- 14. (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:
- 15. Whether the Bonafide certificate from Head of Institution has been attached: Yes/No.
- 16. For Hostel Subsidy, the Bonafide certificate from mentioning the amount is attached: Yes/No

If Yes at Item No. 16, Amount claimed for Hostel Subsidy:.....

18.	(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 : inand 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-imbursement from any other source
and wi	Il not claim the same in future.
	rtified that my child in respect of whom reimbursement of Children Education Allowance is applied ying in the School/Jr. College which is recognized and affiliated to Board of Education/University.
in [.] re to	e information furnished above are complete and correct and I have not suppressed any relevant formation. In the event of any change in the particulars given above which affect my eligibility for imbursement of Children Education Allowance, I undertake to intimate the same promptly and also refund excess payments if any made. Further, I am aware that if at any stage the formation/documents furnished above is found to be false, I am liable for disciplinary action.
	Signature:
	Name:
	Design & Station
	Working Under:
	Date:
Declar Date:	The family composition of the claimant has been verified from the official records such as Passation/Registeretc and found correct.
FOR O	Signature of Sr. Subordinate With office seal and stamp FFICE USE ONLY

SI. No.	Name of staff	P.F.No.	CEA Amount	Hostel Subisdy Amount if any	Total

Forwarded to :Sr.DFM/CKP for vetting and early return.

Bill Clerk/OS

17.

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 of Sri/Smt	is a bonafid
student of this school and studied in Class during the financi	al year and as pe
School records his/her date of birth is	in word
This is to also certify that the above named child had stud	died in this school in the previou
academic year	
He/She bears a good moral character.	
** During the year Master/Baby/Mr./Miss	had resided in the residentia
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: Signatu	re Head of the Institution/School (with Stamp and seal)
**(Strike out it is not applicable)	