

**SATLUJ JAL VIDYUT NIGAM LIMITED**

**CLAIM FOR REIMBURSEMENT OF EXPENDITURE ON ACCOUNT OF TUITION FEES AND/OR HOSTEL SUBSIDY**

1. Name of the employee : \_\_\_\_\_
2. Employee No. : \_\_\_\_\_
3. Designation : \_\_\_\_\_
4. Department : \_\_\_\_\_
5. Details of children in respect of whom CEA claimed:

Sl.No.	Name of Child	Name of School	Class of Study

**CLAIM:**

With reference to sanction of P&A Department, I hereby submit my claim towards reimbursement received by me on account of expenditure incurred by me towards tuition fees and/or\* hostel subsidy while educating my Child/children\*:

SlNo.	Month	year	Amount claimed ( Rs. Per Month)	
			Tuition fees	Hostel Subsidy
<b>Total :</b>				

**CERTIFICATE:**

1. Certified that during the above mentioned period, I have incurred an expenditure of Rs.....(total) @ Rs..... p.m. towards tuition fee and/or Rs. ....(total) @ Rs..... p.m. towards hostel subsidy for educating my child/children\*.
2. Certified that the information submitted by me, as above, is correct and in case any of the information submitted by me is found to be incorrect, I understand that I may be disqualified for reimbursement of tuition fees and/or\* hostel subsidy in respect of my child/children\*, without prejudice to the rights of the management to take appropriate action as per the Company Rules in vogue.

(SIGNATURE OF THE EMPLOYEE)

NAME

EMPLOYEE NO.

DESIGNATION

DEPARTMENT

DATE

PLACE

NB: The claim for a given academic year must be preferred within two months of completion of the academic year, failing which the same shall become time barred and the reimbursement already made shall be recovered in lumpsum from the salary of the employee concerned.

(\*Please strike out the portion not applicable)