



# ALL INDIA INSTITUTE OF MEDICAL SCIENCES, JODHPUR (RAJASTHAN)

## UNDERTAKING FROM THE PARENTS OF THE CHILDREN

(FOR REIMBURSEMENT OF CEA)

I ..... hereby undertake that my Son/Daughter  
Master/ Kumari..... is studying in class..... during the  
academic session Apr 2017-March 2018 in School/Institution, namely.....  
.....

I have paid a sum of Rupees .....towards tuition fee of my ward  
for the period from...../...../.....(DD/MM/YY) to ...../...../.....(DD/MM/YY).  
Necessary certificate from the concerned School/authority shall be submitted in due course of time.  
Kindly process my claim of Childrenn And Education Allowance submitted by me.

Place:-

Date:-

Signature

Name:.....

Designation:.....

Department:.....

Contact No:.....