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# EUROPEAN COMMISSION OFFICE FOR THE ADMINISTRATION AND SETTLEMENT OF INDIVIDUAL ENTITLEMENTS

EDUCATION ALLOWANCE
2003-2004

PMO - Luxembourg

Personnel No:				
Surname and forename of applicant:				
Office addressOffice telephone No:				
Private address: Town - Country:				
Pursuant to Article 3 of Annex VII to the Staff Regulations of Officials of the European Communities (see the administrative information pages http://www.cc.cec/guide), I hereby apply for an education allowance for my dependent child/children named in Annex 1.				
I hereby declare: (please tick as applicable)				
O that I am a <u>new</u> official/temporary staff member and entered the service of the Commission on				
O that I have come from an external Commission office or from another Community institution				
O that there has been no change since last year's application that would affect the amount of the education allowance				
O that there has been a change since last year's application that will affect the amount of the education allowance				
O that my child is attending primary school for the first time				
O that my child is attending university or some other post-secondary course for the first time				
O that (child's name)completed his/her education onand is				
still/no longer dependent on me				
O that (child's name)interrupted his/her education onand is no				
longer/is still dependent on me				
O that (child's name)resumed his/her education (after an interruption) on				
I enclose supporting documents and undertake to notify the appropriate administrative department immediately of any change in my child's circumstances (gap year, military or civilian service, traineeship, marriage, etc.) liable to affect my entitlement to the allowance or its amount. I am aware that any undue payments made to me will be deducted from my salary.				
Applications must reach the following address by <b>15 NOVEMBER 2003</b> : PMO 5, Education Allowance Department: Office JMO A1/108.  All enquiries should be addressed to Mr René Simon – Tel.: 34787, Mr Stéphane D'ORAZIO – Tel.: 36086				
Place Date Signature				
For official use only				

#### **ANNEX 1**

### THIS APPLICATION FOR AN EDUCATION ALLOWANCE RELATES TO THE FOLLOWING CHILDREN:

1.	Child's name						
_	receives another education allowance / grant from						
	since when(per month)(per year)						
_	other resources: (please provide supporting documents)						
	gross monthly amount						
_	- attends the European School in						
M	eans of transport used: ☐ school bus home-school / school-home						
	□ public transport (you <b>must</b> attach a copy of the season tickets)						
	☐ private transport: distance, one way only between home and schoolkm						
N.	B. The following expenses are reimbursed ONLY on the basis of detailed bills and receipts:						
- - -	registration and examination fees courses at winter sports, seaside, countryside or similar (on presentation of an attendance certificate) transport: - public transport (you must attach a copy of the season tickets) - school transport - private transport: distance one way only between home and school km						
<b>2</b> .	<ul><li>2. Child's name</li></ul>						
	since when						
	amount(per year)						
-	other resources: (please provide supporting documents)						
	gross monthly amount						
_	attends the European School in						
M	Means of transport used: ☐ school bus home-school / school-home						
	□ public transport (you <b>must</b> attach a copy of the season tickets)						
	☐ private transport: distance, one way only between home and schoolkm						
N.	B. The following expenses are reimbursed ONLY on the basis of detailed bills and receipts:						

3.	Child's name						
_	receives another education allowance / grant from						
	since when(per month)(per year)						
_	other resources: (please provide supporting documents)						
	gross monthly amount						
_	attends the European School in						
Me	eans of transport used: ☐ school bus home-school / school-home						
	□ public transport (you <b>must</b> attach a copy of the season tickets)						
	☐ private transport: distance, one way only between home and schoolkm						
N.	B. The following expenses are reimbursed ONLY on the basis of detailed bills and receipts:						
- - -	registration and examination fees courses at winter sports, seaside, countryside or similar (on presentation of an attendance certificate) transport: - public transport (you must attach a copy of the season tickets) - school transport - private transport: distance one way only between home and school km						
<b>4.</b>	Child's name						
	since when						
_	other resources: (please provide supporting documents)						
	gross monthly amount						
_	attends the European School in						
Me	eans of transport used: ☐ school bus home-school / school-home						
	☐ public transport (you <b>must</b> attach a copy of the season tickets)						
	bubile transport (you must attach a copy of the season tionets)						
	□ private transport: distance, one way only between home and schoolkm						
N.							

### ANNEX 2

## **CERTIFICATE OF ATTENDANCE**

# to be filled in by the educational establishment (this certificate is not required for children attending the European School)

I the undersigned (name)				(position)		
(name	name of pupil/student)(date of birth)			e of birth)		
is	attending	(name	of	establishment)		
(town)		(cour	ntry)	f	or the <b>2003/2004</b> acade	emic year, which began on
(date).		and	d finishe	es on (date)	He/she	s in class/year of
the				course describ	ed below:	
TYPE	:					
0	DAY COURS	SE				
0	EVENING CO	OURSE				
O CORRESPONDENCE COURSE						
0						
LEVE	L:					
0	PRIMARY					
0	O SECONDARY or equivalent					
0	·					
THE P	UPIL/STUDEN	NT is enrolle	d as a:			
0	DAY PUPIL					
0	BOARDER (	Annex 3 mu	st be fille	ed in)		
0	OBSERVER					
TOTA	L WEEKLY HO	OURS ATTE	NDANC	E:		
(date a	and place)					
Signat	ure			Official sta	mp	

#### **ANNEX 3**

### **DECLARATION**

### **ONLY FOR PRIMARY OR SECONDARY PUPILS**

(to be filled in by the person with whom the child lives, or by a representative of the establishment where he/she boards)

I the undersigned (name)	(position or capacity)	certify tha
(name of pupil/student)	(date of birth)	is/was living from
	to	at the following address
(private address or establishment)		
(date and place)		
Signature O	Official stamp (for establishments)	