UNITED NATIONS  NATIONS UNIES

**EDUCATION GRANT AND RELATED BENEFITS**

**CLAIM FOR PAYMENT AND/OR REQUEST FOR ADVANCE**

***INSTRUCTIONS:*** When submitting a claim for payment and/or a request for advance, you must complete parts I and II of this form.

In addition, please complete:

* Part III if you are submitting a claim for payment of the education grant and related benefits and/or
* Part IV if you are submitting a request for an advance against the education grant and related benefits.

For each child, attach documentation to substantiate the amounts requested/claimed.

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| 1. **REQUEST/CLAIM AND CERTIFICATION**   I request an advance against the education grant and related benefits for the academic year  20       to 20       AND/OR  I claim the education grant and related benefits for the academic year 20       to 20  I understand:   * That any advance will be recovered from my salary if a claim for payment is not submitted within the set deadline; * My obligation to retain for five years the supporting documentation in its original form or scanned copies certified as seen by a UN official and to submit it upon request for monitoring and compliance purposes; * My obligation to promptly inform the Organization of any changes in the information or estimates provided in support of my request/claim; * That the Organization may conduct a compliance review of my requests or claims; * The consequences of submitting incomplete, unsubstantiated or false information, as discussed in section 10.4 of ST/AI/2018/1.   I attest:   * To the correctness of the information provided herewith; * That I have disclosed all scholarships, bursaries or similar grants received from the school or any other entity in respect of the child/children; * That no other education grant is being paid in respect of the child/children for the periods indicated; * That during the year(s) of the claim I am submitting, (select the option that applies)   I have not been telecommuting on flexible working arrangements from my home country or country of permanent residence; OR  I have been telecommuting on flexible working arrangements from my home country or country of permanent residence on these dates (please specify):   * That as a result of the COVID pandemic, the school(s) (select the option that applies):   did not refund any fees or expenses, OR  refunded some expenses. Please specify amount:  I authorize the United Nations to contact the educational institution directly and to request any information or documentation related to the present request and/or claim  Signature of staff member:\_      Date: \_\_\_\_\_     \_\_\_\_\_\_  (Typed signature is acceptable) (dd/mm/yyyy) |
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**\* Please ensure both pages of this form are submitted, preferably double-sided if submitted in hard copy.**

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| **UNITED NATIONS** | **UN** | **CLAIM FOR PAYMENT OF EDUCATION GRANT AND RELATED BENEFITS**  **AND/OR ADVANCE AGAINST THE EDUCATION GRANT AND RELATED BENEFITS** | | | | | | | | | |
| **II. Staff member:** | | | | | | | | | | | |
| Last name of staff member | | | First | Middle initial | | Index No. | Level | Dept. or Div. | | Ext. | |
| Type of appointment | | | Expiry date | Entrance on duty date  (dd/mm/yy) | | | Home country | Duty station | | | Type of U.S. visa |
| Is the child’s other parent a staff member of the United Nations common system? | | | Yes  No |  | | | If yes, is the other parent requesting an advance/claiming education grant as well? | | | | Yes  No |
| Child’s name |  | | | |  | | | |  | | |
| Date of birth (day/month/year) |  | | | |  | | | |  | | |
| Name of school or university attended |  | | | |  | | | |  | | |
| Location of school  (city, country) |  | | | |  | | | |  | | |
| Level of instruction  (class or grade) |  | | | |  | | | |  | | |
| **III. Claim for education grant and related benefits:** | | | | | | | | | | | |
| Academic year  (from – to) | Day/month/year – day/month/year | | | | Day/month/year – day/month/year | | | | Day/month/year – day/month/year | | |
| Child attended school (from – to)  (attach form P.41/B) | Day/month/year – day/month/year | | | | Day/month/year – day/month/year | | | | Day/month/year – day/month/year | | |
| Total cost from academic institution (attach form P.41) | Currency and amount | | | | Currency and amount | | | | Currency and amount | | |
| Tuition in mother tongue (attach form P.41/A) | Currency and amount | | | | Currency and amount | | | | Currency and amount | | |
| Other admissible expenses not included in P.41 forms \* | Currency and amount | | | | Currency and amount | | | | Currency and amount | | |
| Scholarship, bursary or similar grant (provide details in attachment if not certified by the school in P.41) | Currency and amount | | | | Currency and amount | | | | Currency and amount | | |
| Boarding assistance | Check box | | | | Check box | | | | Check box | | |
| Child was boarding (from – to) | Day/month/year – day/month/year | | | | Day/month/year – day/month/year | | | | Day/month/year – day/month/year | | |
| **IV. Request for advance against the education grant and related benefits** | | | | | | | | | | | |
| Academic year  (from – to) | Day/month/year – day/month/year | | | | Day/month/year – day/month/year | | | | Day/month/year – day/month/year | | |
| Education grant (see ST/IC/2018/7, paras. 4–9)  Select ONE of the following options: | Admissible expenses for next year  (attach list of projected admissible expenses if you select this option)  OR  Last year’s EG entitlement amount | | | | Admissible expenses for next year  (attach list of projected admissible expenses if you select this option)  OR  Last year’s EG entitlement amount | | | | Admissible expenses for next year  (attach list of projected admissible expenses if you select this option)  OR  Last year’s EG entitlement amount | | |

\* Please provide itemized list of admissible expenses with name of provider, dates and proof of payment as an attachment to this application