

Clearance Fee: \$150

Paid



STUDENT CLEARANCE FORM

Name **ID# No.**

Major **Date**

Faculty.....

The above named student is graduating and leaving the University at the end of this semester. Please clear him/her before he/she leaves.

1. Senior Accountant
Signature Date

2. Chairman of Department (HOD)
Signature Date

3. Registrar
Signature Date

VP of Admin Affairs: Cleared Not Cleared

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Signature Date