

UNIVERSITY OF EMBU

STUDENT'S CLEARANCE FORM

Instructions

- 1. Fill the form in triplicate; retain a copy, submit a copy to the Finance Office and one to the Registrar (ARE)
- 2. Surrender your student's Identity card as you clear with the Registrar (ARE) (Students who have lost their student's Identity card will be required to provide an abstract and pay a replacement charge of Ksh. 500)

Stud	ent's Details		
School		Mobile No	
Pleas	se clear with the following Departm	nents / Sections:	
Academic Department (Students who are housed in more than one teaching Department are required to clear with each of the Departments) i			
	Name of Department	CoD Name	(Signature, Date/Stamp)
ii iii	Name of Department	CoD Name	(Signature, Date/Stamp)
	Name of Department	CoD Name	(Signature, Date/Stamp)
Scho	ool		
	(Name of Dean)	(Signature)	(Date/Stamp)
Libra	ary		
	(Name of Librarian)	(Signature)	(Date/Stamp)
Acco	omodation		
	(Name of officer)	(Signature)	(Date/Stamp)
Spor	ts & Games		
	(Name of officer)	(Signature)	(Date/Stamp)
Dear	n of Students		
	(Name of officer)	(Signature)	(Date/Stamp)
UESA	A		
	(Name of officer)	(Signature)	(Date/Stamp)
Sena	ite Affairs		
	(Name of officer)	(Signature)	(Date/Stamp)
	(Name of officer) strar (ARE)	(Signature)	(Date/Stamp)
		(Signature)	(Date/Stamp)