STUDENTS CLEARANCE FORM



INSTRUCTIONS

Fill in quadruplicate

Students are advised to complete the form either at the end of the course or termination of the course

NAME: (Capitals)	REG. No.
	FACULTY :
YEAR OF STUDY:	ACADEMIC YEAR:

CLEARANCE UNDER OFFICIAL STAMP

DEAN OF SCHOOL, JKUAT	CLEARED/NOT CLEARED
Remarks	
0	Charges Shs.
Deans Signature	Date:
DIRECTOR GRADUATE SCHOOL KEMRI	CLEARED/NOT CLEARED
Remarks	
0	Charges Shs.
Directors Signature	Date:
	CLEARED/NOT CLEARED
Remarks	
0	Charges Shs.
DD&TP Signature:	Date:
KEMRI LIBRARY C	CLEARED/NOT CLEARED
Remarks	
0	Charges Shs.
Librarian signature	Date:
	CLEARED/NOT CLEARED
Remarks	
0	Charges Shs.
Registrars Signature	Date:
	CLEARED/NOT CLEARED
Remarks:	
	Charges Shs.
DD F&A Signature	
Total Charges 1 to 6 and Outstanding Fees	
Students finance officer sign	Date: