



## POSTGRADUATE STUDENTS' CLEARANCE FORM

Fill in quadruplicate and surrender all completed copies to Board of Postgraduate Studies. Make sure that you obtain official stamp at every stage of clearance.

NAME: (Capitals)		REG. NO.
FACULTY:	YR OF ADMISSION:	YR OF COMPLETION:
<b>OBTAIN OFFICE STAMP ON CLEARANCE AT EVERY STAGE</b>		
1.	<b>DIRECTOR, BOARD OF POSTGRADUATE STUDIES</b>	<b>CLEARED/NOT CLEARED</b>
	Remarks:	
	Director's signature:	Date:
2.	<b>CHAIRPERSON OF DEPARTMENT</b>	<b>CLEARED/NOT CLEARED</b>
	Remarks:	Charges in Kshs.
	Chairperson's signature:	Date:
3.	<b>DEAN OF FACULTY/DIRECTOR OF SCHOOL</b>	<b>-+</b>
	Remarks:	Charges in Kshs.
	Dean/Director's sign:	Date:
4.	<b>UNIVERSITY LIBRARIAN</b>	<b>CLEARED/NOT CLEARED</b>
	Remarks:	Charges in Kshs.
	Librarian's signature:	Date:
5.	<b>DIRECTOR SPORTS AND GAMES</b>	<b>CLEARED/NOT CLEARED</b>
	Remarks:	Charges in Kshs.
	Director's signature:	Date:
6.	<b>HALLS OF RESIDENCE</b>	<b>CLEARED/NOT CLEARED</b>
	Remarks:	Charges in Kshs.
	House Keeper's signature:	Date:
7.	<b>STUDENTS' FINANCE OFFICE</b>	<b>CLEARED/NOT CLEARED</b>
	Remarks:++	
	Total charges 2-7 and any outstanding fees	Charges in Kshs.
	Students' Finance Officer's signature:	Date:

Copy to: (i) Dean of Faculty /Director of Campus/Institute (ii) Chair of Department (iii) Student

Note: For students hosted by KEMRI, Items 5 to 7 do not apply.