

FINAL C L E A R A N C E F O R M

Instructions

- i. Section **ONE** is to be duly completed by the student.
- ii. Section **TWO** is to be signed by the Librarian, Dean of Students, Finance Office, Registrar and Examination's officer in the order they appear.

SECTION ONE

| Name of Student: | Admission No: |
|-----------------------|--------------------------|
| School/Department: | |
| Programme: | Specialization (if any): |
| Period of study: From | То |

I confirm that I have no pending obligations with the university.

| Sign: | Date: | Mobile No: |
|---------|-------|------------|
| Student | | |

SECTION TWO

1. LIBRARY

I certify that the above named student has:

1. □ Returned all books and or property belonging to the Riara University Library. loss or damage state item (s)______ and value KES_____.

| Name: | Signed: | ••••• | Date: |
|-----------|---------|-------|-------|
| Librarian | | | |

2. <u>DEAN OF STUDENTS</u>

I certify that the above named student has:

- 1. \Box No pending disciplinary case(s).
- 2. Surrendered all equipment belonging to the university. (In case of loss or damage state item ______ and value KES ______

3. D No outstanding balance in the Cafeteria. (In case of any bills, state below KES.____).

4. 🗆 Registered for Alumni Association.

| Name: | Signed: | Date: |
|------------------|---------|-------|
| Dean of Students | | |



3. ICT OFFICE

I certify that the above-named student has no ICT equipment(S) for the University. loss or

damage state item (s)______and value KES_____.

Name: ICT Officer

Signed: Date:

4. FINANCE / ACCOUNTS

I certify that the above named student has paid all outstanding charges owing to the University and is hereby cleared to receive all Certificates and Testimonials.

| Name: | Signed: | Date: |
|---------|---------|-------|
| Finance | | |

5. REGISTRAR - ACADEMIC AFFAIRS

I certify that the above named has:

- i. Completed all Degree/Diploma/Certificate requirements as per his/her major.
- ii. **D** Cleared of all University obligations
- iii. D Handed in the student ID Card

Name:Signed:Date:Registrar AcademicsDate:

6. EXAMINATION'S OFFICER

I certify that the above named has:

- i. Cleared of all University obligations
- ii. D He/she is entitled to receive Degree Certificate and any Testimonials.
- iii. **D** Handed over the complete gown

| Name: | Signed: | Date: |
|---------------------|---------|-------|
| Examination officer | | |