

**KIRINYAGA UNIVERSITY**

**STUDENT CLEARANCE FORM**

*(To be submitted in triplicate)*

Student Name: ..... Reg. No: .....

School: ..... Department: .....

Course: ..... Mobile No: .....

Year of Adm: ..... Year of Exit: .....

**NB: A student has to clear with the following department in the following order before exiting from KyU.**

SECTION	SIGNATURE	DATE
HOD/ COD	.....	.....
Sports	.....	.....
House keeper	.....	.....
Librarian	.....	.....
Dean of students Office	.....	.....
Finance Officer	.....	.....
Registrar, ASA	.....	.....

**REMARKS BY THE REG. (ASA)**

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