

The
Management
University
of Africa



Sponsored by the Kenya Institute of Management

UNDERGRADUATE AND POSTGRADUATE

CLEARANCE FORM

Name:ADM. NO.:

Programme (e.g. BML, BDS, MBA etc.):

Postal Address:Tel No. Mobile:

E mail address

Please Tick as Appropriate:

Postgraduate

Undergraduate

Reasons for clearing from the university (Tick as appropriate)

Completion of my studies

Transfer to another University

Others:

I, the undersigned, do state that this clearance is correct to the best of my knowledge and do further state that any discrepancies that may be detected after the clearance will be put into my personal account to compensate the University.

In case of any outstanding claims on the student for property lost or damaged, kindly attach the relevant details.

Students Signature: _____ Date: _____

I hereby request to be cleared by the respective departments /Directorates of the University.

1. Library

The student has returned all Library books or has the following outstanding liabilities:

University Librarian _____ Date: _____

2. Administration _____ Date: _____

3. Information & Technology (ICT) _____ Date: _____

4. Dean of Respective School _____ Date: _____

5. Dean of Students _____ Date _____

6. Examinations' Department: _____ Date _____

7. Accounts _____ Date: _____

8. Registrar (ASA)

I confirm the student has surrendered his/her student ID and has no pending student matters.

Registrar _____ Date _____