



CLEARANCE FORM

Date:

Subject: Application for Clearance

I am a student of BSMRAU. I have furnished the following information for clearance which is required for Provisional Certificate/Transcript/Testimonial/Withdrawal of submitted Transcript (for the case of Cancellation of admission).

1. Name of the Student :
2. Program :
3. Registration Number :
4. Department/Faculty :
5. Term of Admission :
6. Term of Graduation :
7. Signature of the Student :

Signature with Comments of the Head of Unit/Department/Faculty

1. Major Professor : Sign.
2. Head of the Department : Sign.
3. Director (Students Affair) : Sign.
4. Proctor : Sign.
5. Provost : Sign.
6. Library Chief : Sign.
7. Dean (Concerned) : Sign.
8. Accounts Section : Sign.

Approved

Registrar

Treasurer