STUDENT AFFAIRS DIVISION

AHMADU BELLO UNIVERSITY, ZARIA

EXIT/CLEARANCE FORM

(To be completed in Duplicate)

All students should complete the Exit/Clearance Form in duplicate at the end of the session and when leaving the University finally, that all University properties are returned in good shape. A copy of the completed and duty signed form should be left with the Hall Administration for record purpose.

NAME: JIBRIL, FAHD YARO   **ROOM NO:**   ....

COURSE: B.Sc Computer Science   **REG NO.:**   U18CS1142

DEPARTMENT: Computer Science

DESTINATION: ....

PURPOSE: ....

CONTACT ADDRESS: NO 118 11TH AVENUE, FEDERAL LOW-COST JOS

ACADEMIC HEAD: Department of Computer Science.
This is to certify that **JIBRIL, FAHD YARO** has been cleared by this Department.

....
            Date   HOD's Signature and Stamp

FACULTY: Faculty of Physical Sciences.
This is to certify that **JIBRIL, FAHD YARO** has been cleared by the Faculty.

....
            Date   Dean's Signature and Stamp

DEPARTMENTAL LIBRARY: Department of Computer Science.
This is to certify that **JIBRIL, FAHD YARO** has returned all the Departmental Library Books, checked and are in good shape.

....
            Date   Librarian's Signature and Stamp

KASHIM IBRAHIM LIBRARY: This is to certify that **JIBRIL, FAHD YARO** has returned all Library Books, checked and are in good condition.

....
            Date   K.I.L. Signature and Stamp

SPORT: This is to certify that **JIBRIL, FAHD YARO** is not in possession of sports equipment.

....
            Date   Sports Unit Signature and Stamp

HALL OF RESIDENCE: This is to certify that **JIBRIL, FAHD YARO** has submitted the items indicated below checked and found correct and in good condition.

ITEM	REMARK	RECEIVER'S SIGNATURE
BED	_____	_____
MATTRESS	_____	_____
KEY	_____	_____

....
            Date   Hall Administrators' Signature and Stamp