



COMSATS Institute of Information Technology

Defence Road off Raiwind Road, Lahore

Department of Electrical Engineering

SUDENTS CLEARANCE CERTIFICATE

Name _____ Registration No. _____

Program: ☐ BS(TE) ☐ BS(CE) Date: _____

Reason to Leave _____

Signature Student: _____

S.No	Department/Section	Remarks	Signature	
01	Computer Lab/ Server Room			
02	Library			
03	Cafeteria			
04	Transport Officer/PRO			
05	ICSS (Student Affairs)			
06	Warden (Hostel)			
07	Registration Branch			
08	Accounts Branch			
09	Laboratories	Lab Assistant Name and Sign	Lab Incharge Name	Signature of Incharge
i	Electronic Lab			
ii	Communications System Lab			
iii	Microprocessor /VLSI Lab			
iv	Machine/Control Lab			
v	Data Comm and internetworking Lab			
vi	Project Lab			
vii	RF/Microwave Lab			
10	Alumni Reg. from Students Affairs Office (If degree completed)			
11	DCO (EE)			

Additional Remarks: (if any): _____

Dr. Saleem Farooq Shaukat
Chairman/HoD (EE)