STUDENT AFFAIRS DIVISION AHMADU BELLO UNIVERSITY, ZARIA EXIT/CLEARENCE 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:	ROOM NO
COURSE:	REG. NO
DEPARTMENT:	
DESTINATION:	
PURPOSE:	
CONTACT ADDRESS:	
ACADEMIC HEAD: Department of	
Department	has been cleared by this
Date	HOD's Signature and Stamp
FACULTY: Faculty of:	
This is to certify thatFaculty	has been cleared by the
Date DEPARTMENTAL LIBRARY: Department of:	Dean's Signature and Stamp
Library Books; checked and are in good shape.	has returned all the Departmental
Date	Librarian's Signature and Stamp
KASHIM IBRAHIM LIBRARY: This is to certify tha	t
has returned all Library Books; checked and are	
Date	K.I.L. Signature and Stamp
SPORTS: This is to certify that	is not in possession of sports equipment.
Date HALL OF RESIDENCE	Sports Unit Signature & Stamp
	has submitted the items indicated below
checked and found correct and in good condition	on.
<u>ITEM</u> <u>REMARK</u>	<u>RECEIVER'S SIGNATURE</u>
BED	
MATTRESS	
KEY	
The above is checked and found correct	
Date	Hall Administrator's Signature & Stamp