



# DHA SUFFA UNIVERSITY KARACHI

Khayaban-e-Tufail, Phase-VII (Extension) DHA, Karachi-75500

## CLEARANCE FORM

(Submit this form in the Registration Department after clearance from all the concerned Departments)

### To be filled in by the student

Reg. #: \_\_\_\_\_ Name of Student: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Program: \_\_\_\_\_ Class & Section: \_\_\_\_\_

CNIC No:       -       -   Year & Semester of passing the last Examination: \_\_\_\_\_

Telephone # (Res): \_\_\_\_\_ Mob: \_\_\_\_\_ E-mail: \_\_\_\_\_

### HOD's Clearance & Recommendations:

- Nothing is outstanding against the student including Labs.
- Student has fulfilled all degree requirements as per plan of study and secured minimum required or above CGPA within the prescribed qualifying period as per HEC / PEC requirement.

Cleared & Recommended:  Not Recommended:  Date: \_\_\_\_\_ HOD's Signature & Stamp: \_\_\_\_\_

### DSU Library Clearance: (Please ensure nothing is outstanding against the student.)

It is certified that the above mentioned student is / is not the member of DSU Library.

Cleared, nothing is outstanding:  Not Cleared due to: \_\_\_\_\_

Librarian's Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Office Stamp: \_\_\_\_\_

### Clearance from Miscellaneous Departments:

Admin Department: Cleared, nothing is outstanding  Signature: \_\_\_\_\_ Office Stamp: \_\_\_\_\_

CSR Dept. (For BBA Students Only): Cleared, nothing is outstanding  Signature: \_\_\_\_\_ Office Stamp: \_\_\_\_\_

### Finance Department Clearance:

It is certified that all dues in respect of the above mentioned student are cleared and nothing is outstanding against him/her including **Ihsan Trust**.

Manager Finance Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Office Stamp: \_\_\_\_\_

### Registration Department Clearance:

1. It is certified that the above mentioned student has obtained clearance from all the relevant Departments and nothing is outstanding against him/her including **Ihsan Trust**. Name and Father's name of the student in the database has been verified and found correct.

2. DSU ID Card received from the student: Yes  No  Remarks \_\_\_\_\_

3. Recommended and forwarded to the Examination Department with the relevant documents.

Deputy/Assistant Registrar's Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Office Stamp: \_\_\_\_\_