

STUDENT CLEARANCE FORM



INSTRUCTIONS

1. Please fill up the form completely.
2. Student is requested to get clearance from respective Department.
3. Completed form must be submitted to **Admission and Student Record Department (ASR)**

NAME

(Capital Letter)

MATRIC NO

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

PROGRAMME

EMAIL

STUDY CENTRE

CONTACT NO

MAILING ADDRESS

A	STUDENT AFFAIRS DEPARTMENT (STAD)	
Please tick (✓) where applicable :		
Disciplinary Records	<input type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	Comment: _____
Sports Club	<input type="checkbox"/> Cleared <input type="checkbox"/> Not Cleared	Comment: _____
Alumni Registration	<input type="checkbox"/> Yes <input type="checkbox"/> No	Comment: _____
Signature & Stamp _____ Date _____		

B	LIBRARY : (Obtain Clearance on Book Returned etc.)	
Please tick (✓) where applicable :		
Items Borrowed From Librar :	Returned <input type="checkbox"/> Yes <input type="checkbox"/> No	Total Cost Estimated : RM _____
Good Condition	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Penalty	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Signature & Stamp _____ Date _____		

C	STUDENT RESIDENCE SERVICE / HOSTEL DEPARTMENT
<p>Accommodation: <input type="checkbox"/> YES <input type="checkbox"/> NO Balance Outstanding Rent: RM _____</p> <p>Premise: _____ Utilities: RM _____</p> <p>Others: RM _____</p> <p>Signature & Stamp _____ Date _____</p>	
D	ACADEMIC DEPARTMENT
<p>Please tick (✓) where applicable :</p> <p>Semester : <input type="checkbox"/> February _____ <input type="checkbox"/> June _____ <input type="checkbox"/> September _____ <input type="checkbox"/> Others _____ (e.g: (✓) Nov 2013)</p> <p>Academic Status : _____</p> <p>Comment: _____</p> <p>Signature & Stamp _____ Date _____</p>	
E	FINANCE DEPARTMENT
<p>Total Fees Charged : RM _____ Payment Received : RM _____</p> <p>Receipt No. : _____</p> <p>Total Refund/Outstanding : RM _____</p> <p>Comment (if any): _____</p> <p>Signature & Stamp _____ Date _____</p>	
F	ADMISSION AND STUDENT RECORD (ASR) : (Matric Card Verification)
<p>Please tick (✓) where applicable :</p> <p>Defective <input type="checkbox"/> Yes <input type="checkbox"/> No Total Cost Estimated : RM _____</p> <p>Penalty <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Signature & Stamp _____ Date _____</p>	

I hereby understand that:

- 1 Access to College's resources and facilities shall cease immediately after the clearance has taken effect.
- 2 It is my responsibility to immediately return all SIDMA belongings such as Library items and settle all outstanding fees, where applicable.

Student's Signature

Date