



SD DOMBO UNIVERSITY OF BUSINESS AND INTEGRATED DEVELOPMENT STUDIES (UBIDS)


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[OFFICE OF THE REGISTRAR]

POSTGRADUATE CLEARNCE FORM



***Note:** Your clearance will be required together with graduation fees pay in slip and copy of valid ID card during collection of certificates to confirm that student has been duly cleared.

 PHOTO	<p style="text-align: right;">DATE: _____</p> <p>ID NO: _____</p> <p>NAME: _____</p> <p>PROGRAMME: _____</p> <p>FACULTY: _____</p>
HEAD OF DEPARTMENT/COORDINATOR	
<p>A.</p> <p>SIGNATURE: _____ Date: _____</p> <p>HoD</p> <p><i>*The above student has successfully completed and submitted final copy of his/her Thesis Dissertation /Term-paper to the department.</i></p>	
DIRECTORATE OF FINANCE	
<p>B.</p> <p>SIGNATURE: _____ Date: _____</p> <p>Director of Finance</p> <p><i>*This is to testify that the above student has paid all academic facility user fees in full and does not owe the university any money.</i></p>	
UNIVERSITY LIBRARY	
<p>C.</p> <p>SIGNATURE: _____ Date: _____</p> <p>Librarian</p> <p><i>*This is to testify that the above student returned all books and reading materials borrowed from the library.</i></p>	
DEAN OF GRADUATE STUDIES AND RESEARCH/SCHOOL OFFICER	
<p>D.</p> <p>SIGNATURE: _____ Date: _____</p> <p>Dean of Graduate School</p> <p><i>*This is to testify that the above student returned all books and reading materials borrowed from the library.</i></p>	