



**Bahir Dar University**  
**College/Faculty/School/Institute of / \_\_\_\_\_**  
**Office of Customers Relation and Information Production Case Team Regular**  
**Postgraduate Student Clearance Sheet**

**Purpose:**

If you want to have a healthy relationship with the university, it is very important to the student to complete this if you want to have a healthy relationship with the university, it is very important to the student to complete this clearance form properly & return it to the University registrar before you leave the university campus what ever the reason may be. Only with the proper termination below can official transcripts, letter of enrollment, student copy, or honorable dismissal be issued. Readmission to any unit of the university will be considered only if proper termination is certified by the University registrar.

**Procedures:**

1. Complete the first part of this form.
2. Have terminal interviews with your academic Advisor.
3. Obtain the signatures designated below, showing that you have returned university property.
4. Return this form to the Office of the Registrar on time.
5. This form becomes part of your permanent University file and record.

Academic year \_\_\_\_\_ E.C                      Semester \_\_\_\_\_

**Personal Data**

\_\_\_\_\_  
 Name of the Student                      Fathers Name                      G/Fathers Name                      Sex

\_\_\_\_\_  
 College/Faculty/School/Institute                      Program                      Year of study (circle it I II III IV V)                      I.D. No

**Reason** for clearing from the University (put 'X' in the appropriate place)

End of academic year \_\_\_\_\_ Academic Dismissal \_\_\_\_\_  
 Disciplinary case \_\_\_\_\_ Withdrawing due to health/family problem \_\_\_\_\_  
 Graduation \_\_\_\_\_

If you have reason other than these, please specify it \_\_\_\_\_

Date of application by the student \_\_\_\_/\_\_\_\_/\_\_\_\_/ E.C                      \_\_\_\_\_  
    mm    dd    yy                      Signature of the application  
 advisor's reason to approve student's clearance, if the reason is other than end of academic year \_\_\_\_\_

\_\_\_\_\_  
 Advisor's name                      \_\_\_\_\_ E.C                      \_\_\_\_\_  
    mm    dd    yy                      Signature

Pleas obtain signatures from the following  
 Full name                      Signature

1. Library                      \_\_\_\_\_
2. Book Store                      \_\_\_\_\_
3. Finance case team                      \_\_\_\_\_

Date of receiving the clearance, if necessary including the I.D card, by the Information and Documentation compilation case worker.  
 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_ E.C  
    dd                      mm                      yy