



CLEARANCE FORM FOR SECURITY DEPOSIT REFUND (For Graduated Student)

Student's Name: _____	Registration ID #: _____
Father's Name: _____	Program: _____
Email: _____	Mailing Address: _____
Mobile #: _____	Cheque in favor of: _____
A/C # (Bank Al-Habib) _____	CNIC # Cheque in favor of: _____

I request for refund my Security Deposit. I have completed my course work with effect from: (Last Semester)

Instructions:

- Attach Original Student's ID Card.
- Attach CNIC Copy of Student.
- Attach CNIC Copy of Parent (if cheque in favor of parent).
- Cheque will be issued in the name of student or parents only. Cheque must be picked up within Six months of issue date, after this cheque will be forfeited. Any cheque that will be remade would incur a processing fee of Rs. 1000/=.

Date: _____	_____ Student's Signature
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<u>OFFICE USE ONLY (DO NOT WRITE BELOW THIS LINE)</u>	
<u>ADMISSION DEPARTMENT</u>	Date: _____
Clarified that said student has been graduated.	Signature _____
<u>ACADEMICS DEPARTMENT</u>	Date: _____
Clarified that said student has no dues and completed his/her course work in Fall/Spring _____.	Signature _____
<u>LIBRARY</u>	Date: _____
Clarified that said student has no dues/library book/magazine/fine/etc.	Signature _____
<u>LAB SECTION</u>	Date: _____
Clarified that said student has no dues/fine/etc.	Signature _____
<u>PROGRAM MANAGER</u>	Date: _____
Certified that said student has completed his/her course work.	Signature _____
<u>FINANCE DEPARTMENT</u>	Date: _____
Clarified that said student has cleared tuition fees, other fees up to dated or other outstanding fees.	Signature _____
<u>RECORD DEPARTMENT</u>	Date: _____
Clarified that file of said student has been closed after clearing from Each Section.	Signature _____

Approved by:

HEAD OF CAMPUS
SZABIST HYDERABAD CAMPUS