**Student Name: ………………………………………………………………………………………..**

**Student Number: ………………………………………………………………………………………..**

**Faculty: ………………………………………………………………………………………..**

**Master Program: ………………………………………………………………………………………..**

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| --- |
| **Clearance Document Issuance Reason** |
|  |

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| --- | --- | --- |
| **Relevant Unit** | **Explanation** | **Approval Signature** |
| **Master Program Coordinator**  |  |  |
| **Library**  |  |  |
| **Accounting Office**  |  |  |

**Date Student’s Name and Signature**