



**University College, Ratmalana**  
**Student Clearance Form**  
**Awards Ceremony - 2024**

Name (with Initials) : .....

Registration No : .....

Academic Year : .....

Course : .....

I have clearly understood that I have no right what so ever to return to the college to continue academic activities as a student hereafter, since my studentship is cancelled.

.....  
Student Signature

.....  
Date

**Clearance Recommendation**

1. Recommendation of the Examination Division. There are no dues to the department.

.....  
Signature

2. Recommendation of the Librarian. There are no dues to the Library.

.....  
Signature

3. Recommendation of the Finance Division. There are no dues to the department.

.....  
Signature

4. Recommendation of the Administration Division. There are no dues to the department.

.....  
Signature

.....  
Signature

Student ID Card Returned/Not Returned