

School Clearance for Students

Student's Name: _____

Class/Section: _____

Roll Number: _____

Date: _____

Reason for Clearance:

- Graduation
- Suspension
- Other: _____

Departmental Clearances:

Department	Signature	Date	Remarks
Library	_____	_____	_____
Science Lab	_____	_____	_____
Sports	_____	_____	_____
IT Department	_____	_____	_____

Cleared by Principal: _____

Date: _____

Student Signature: _____