KENYA INSTITUTE OF MASS COMMUNICATION
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GRADUATION CLEARANCE FORM

(Ref: Section 12.0 of the Academic Policy)

Name: ..... Adm. No. .....

Dept: .....

Course (PGD/DIP/Cert): .....

Mode: Regular ☐ Evening ☐

Student's Signature: ..... Tel. No. ..... Date: .....

PART I: ACADEMICS *(To be cleared by the Relevant HOTD)*

Head of Training Department: Cleared ☐ Not Cleared ☐

Remarks: .....

Signature: ..... Date & Stamp: .....

PART I: DEANERY *(To be cleared by the Dean of Students)*

Head of Training Department: Cleared ☐ Not Cleared ☐

Remarks: .....

Signature: ..... Date & Stamp: .....

PART II: ACCOUNTS *(To be cleared by the Finance Manager)*

Outstanding Fees Clearance:	Cleared	☐	Not Cleared	☐
Graduation Fee Clearance:	Cleared	☐	Not Cleared	☐
Clearance for Other liabilities:	Cleared	☐	Not Cleared	☐

Remarks (Indicate Balance): .....

Signature: ..... Date & Stamp.....

PART III: REGISTRAR, ACADEMIC AFFAIRS *(Please Attached Personal Information Declaration Form 16 B)*

Personal Information Declaration Form: Submitted ☐ Not – Submitted ☐

Cleared for Graduation: ☐ Not Cleared for Graduation ☐

Signature: ..... Date & Stamp: .....

Registrar (Academic Affairs)