

LUSAKA BUSINESS AND TECHNICAL COLLEGE MANAGEMENT BOARD

END OF TERM CLEARANCE FORM

HOSTEL.....ROOM.....COURSE.....LEVEL.....

SECTION A STUDENT.NO. -----

MR/ MRS/ MS :------(Full Names in block letters)

1. I INTEND LEAVING THE COLLEGE OR HOSTEL ON DATE-----

FOR THE FOLLOWING REASON-----

2. MY SPONSORS ARE -----

3. MY FORWARDING ADDRESS IS -----

DATE -----SIGNATURE-----

SECTION B

I CERTIFY THAT THE NAMED STUDENT HAS RETURNED ALL THE BOOKS, EQUIPMENT AND HIS/HER IDENTITY CARD BELOGING TO THE SECTION OR DEPARTMENT AND HAS PAID FOR THE ITEMS NOT RETURNED.

1. **CLASS TUTOR/ LECTURER IN CHARGE**-----

SIGNATURE/DATE/REMAKS-----

2. **LIBRARIAN** -----

3. **SPORTS OFFICER**-----

4. **FINANCE MANAGER**.....

5. **MATRON/PATRON HSTL/KEYS.....MATRESS.....BED.....CURTAINS.....**

6. **STUDENTS AFFAIRS**.....

NOTE: If you are a day scholar, write 'NIL' on Hostel & Room

Date Stamp