The University of Faisalabad

SIC Code_____

Hostel Clearance Certificate

Name:_____ **Father's Name:** _____

Registration No :_____ **Program:**_____

Session :_____ **Semester:** _____

Address:_____

_____ **Email:**_____

Telephone No (Residence):_____ **Telephone No(Mobile):**_____

It is certified that nothing is outstanding against Ms / Mrs _____

at the time of leaving the hostel.

Department	Signature
Accounts Office	
Hostel Warden	
Mess/Cafeteria	
Tuck Shop	
Department Focal Person	

Under Taking by Student

I affirm that irrespective of the above clearance given by respective departments; I do not owe anything to The University of Faisalabad. If anything due found against me, I authorize the university management to recover the same from my final account.

I also undertake that I will not defame my institution, its faculty members and administration in any form.

_____ _____

Student Signature **Date**

_____ _____

Hostel In-charge **Date**

_____ _____

Deputy/Assistant Registrar **Date**