**ACHARYA NARENDRA DEV COLLEGE**

(University of Delhi) Govindpuri, Kalkaji, New Delhi- 110 019

**Student’s Clearance Certificate**

***For refund of security money / Library Security deposit .***

The following departments/sections are requested to give necessary clearance in respect of Mr./Ms………………………….. Student of ……………………………………… Part I / II / III (Course). College Roll No………………. academic session …………….

Dealing Assistant ………………

**Laboratories:-**

Botany………………………Chemistry……………………..…Computer……………

Electronics………………………Physics………………………Zoology……………..

BioMedical……………Web Fecilitation Centre ………………Library………………

Sports**………………..**Administration…….…………….Accounts……..……………..

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**To be essentially filled by students of IIIrd year**

Passout year \_\_\_\_\_\_\_\_\_\_\_

**Have you- joined a job / pursuing Higher studies / Any other**

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| ***In Case of Job*** :  Designation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of Company\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Salary Per Annum \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. E-mail i.d. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | ***In Case of Higher Studies :***  Name of the Course\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name of University/College with address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  E-mail i.d.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Are you preparing for same exams? Give details:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Any other (give details) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Students’s Name………………………..

Date : …………………..

Address on which cheque to be dispatched

…………………………………………

……………………………………………

…………………………………………….

Contact No…………………………….......

Signature…………………………………...

……………… …………………………..

BURSAR PRINCIPAL