



BUTERE TECHNICAL AND VOCATIONAL COLLEGE

P.O BOX 90, 50101, BUTERE

Email:info@buteretvc.ac.ke, website:www.buteretvc.ac.ke, Mobile:0759448275/07 0727861270

STUDENT CLEARANCE FORM (To Be Filled In Triplicate).

Name.....ADM No.....Department.....
Course.....Intake.....Module/Level Clearing.....
Phone.....Postal Address.....Email.....

FOR OFFICIAL USE ONLY

TECHNICIAN

LIBRARY

DEPARTMENT

BOARDING

STORE

SPORTS

DEAN OF STUDENTS

REGISTRY

FINANCE

REGISTRY

All Students upon completing a module/ course **MUST** ensure that they have filled the Clearance Form and deposited the **College I.D** with the registry officer. This form, when completed **MUST** be returned to the **Registry Office**.

Student's Signature.....Date.....

Officer Issuing **Result slip**.....Date.....Sign.....

Officer Issuing **Certificate**.....Date.....Sign.....