

MOI UNIVERSITY

CLEARANCE CERTIFICATE (TO BE FILLED IN DUPLICATE)

PART A: MEMBER OF STAFF CLEARING

- (i) Name of Officer leaving..... PF. No.....
- (ii) Signature:..... Date.....
- (iii) Designation.....
- (iv) Reason for leaving University.....
.....

PART B: HEAD OF DEPARTMENT/SECTION/UNIT

This officer is under my immediate supervision and I confirm that he/she has no liabilities with the department
 Verified by..... Sign.....

PART C: DEAN OF SCHOOL/ DIRECTOR OF INSTITUTE

I confirm that this officer has/has no liabilities with the Faculty
 Verified by..... Sign.....

PART D: LIBRARY

All books returned/not returned..... Charge Kshs:.....
 Verified by..... Sign..... Date.....

PART E: BOOKSHOP

Outstanding amount Kshs:.....
 Verified by..... Sign..... Date.....

PART F: UNIVERSITY FARM

Outstanding amount Kshs:..... Sign.....
 Verified by..... Sign..... Date.....

PART G: ESTATES STORE

- PART (i):** Verified by..... Sign.....
- (ii) Inspection of House No..... Date.....
(Inspection Report attached)
We consider that the occupant be surcharged a sum of Kshs:.....

Verified by..... SignDate.....

PART H: MUSCO SACCO

Loans Balance Kshs:.....

Verified by..... Sign.....Date.....

PART I: EXPENDITURE SECTION

Medical and other outstanding bills Kshs:.....

Verified by..... Sign.....

PART J: PERSONAL CLAIMS SECTION

Outstanding amount of imprest Kshs:.....

Verified by..... Sign.....Date.....

PART K: REVENUE SECTION

Outstanding Invoices Kshs:.....

Verified by..... Sign.....Date.....

PART L: HOUSING

(i) Outstanding House Rent Kshs:.....

(ii) Outstanding Electricity Bill Kshs:.....

(iii) Outstanding Water Bill Kshs:.....

Verified by:..... Sign.....Date.....

REGISTRY: M Number of leave days balance.....

Staff Identification Card Returned/Not Returned..... Charge Ksh.....

Verified by..... Sign.....Date.....

PART: N: SALARY SECTION

(i) Outstanding salary advance.....

(ii) Salary has been stopped with effect from.....

(iii) Salary overpayment amounts to Kshs.....

Verified by..... Sign.....Date.....

PART O: AUTHORISED/APPROVED

Both certificates received

DVC-Administration, Planning & Development

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Signature

Date

