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CLEARANCE FORM FOR STUDENTS COLLEGE VETERINARY & BIOMEDICAL SCIENCES

REG. NO.:			MOBILE NO: DATE: 2. DEPARTMENT OF VETERINARY ANATOMY & PATHOLOGY			
1. SOKOINE	NATIONAL AGRICU	LIURAL LIBRARY	2. DEPARIM	IENT OF VETERINA	RY ANAIOMY & PAIH	IOLOGY
Amount	Signature	Date	Amount	Signature	Date	
3. DEPARTMENT OF VET. MEDICINE & PUBLIC HEALTH			4. DEPARTMENT OF VET. MICROBIOLOGY, PARASITOLOGY & BIOTECHNOLOGY			
Amount	Signature	Date	Amount	Signature	Date	
	ENT OF VET. PHYSI ACOLOGY	OLOGY, BIOCHEMIST	6. DEPARTM	ENT OF VET. SURG	ERY & THERIOGENOI	_OGY
Amount	Signature	Date	Amount	Signature	Date	
7. CICT			8. SPORTS & GAMES DEPARTMENT			
Amount	Signature	Date	Amount	Signature	Date	
9. SUASAB			10. BURSAR			
Amount	Signature	Date	Amount	Signature	Date	
11. DEAN OF	STUDENTS					
Amount	Signature	Date				

I certify that the above named student is cleared