**Student Services Office**
K.L. Campus, University Road, Navrangpura,
Ahmedabad-380009, INDIA
Ph: +91- 79 -2630 2452 / 2740 extn: x 435, x 436 Fax: 91-79-2630 2075
**Website:** www.cept.ac.in   **Email:** studentservices@cept.ac.in

**CEPT UNIVERSITY**

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## Clearance Certificate

**Instructions:** To be completed by student & submitted to Accounts.
Submission of the Clearance Certificate is a pre-requisite for Provisional Certificate/
Degree Certificate/ Refund of Deposit

Student Name _____        Code number_____

Name of Program _____        Faculty of _____

This is to certify that nothing is due from the student cited above. (If there is any due indicate in the Remarks' column)

| Office/ Facility | Name & Signature of the In-charge | Remarks |
|---|---|---|
| Library | | |
| Workshops | | |
| Computer Labs | | |
| Canteen | | |
| Siddhi Printech | | |
| Stationery Shop | | |
| Admin Offices (Thesis CDs, etc.) | | |
| Accounts | | |
| Hostel | | |
| Student Services (ID, etc.) | | |
| Campus Office (Locker's key, etc.) | | |

**Attachments:** Please submit the following to your respective Accounts:
1. Clearance Certificate          2. Receipt of Deposit

Note: In absence of original receipt, students can apply for refund of deposit on INDEMNITY BOND (Rs 10 stamp paper).

**Please submit the following information for future correspondence:**

Permanent Address _____

Correspondence Address_____

CEPT Email ID_____

Personal Email ID_____        Contact No. _____

Signature of Program Coordinator: _____        Date: _____

Signature of Registrar: _____        Date: _____

Signature of Student: _____        Date: _____