

# ACK THIKA MEMORIAL CHURCH SCHOOL

## CLEARANCE FORM (To be filled in duplicate by those leaving the school)

NAME:.....

ADM NO:.....

CLASS:.....

The following section/department heads must clear you before handing in these forms to the Headteacher for final clearance and issuance of leaving/ or clearance certificate or refund of any money.

Department/Section	In-charge	Cleared/Not cleared	Sign	Date
1.Class teacher				
2.Cateress				
3.HOD –Co-Curriculum				
4.HOD -Discipline				
5. HOD - Academics				
6. Accounts				
7.DHT				

The above pupil has/has not been cleared

Headteacher's Sign.....

Date.....

Stamp.....