



To be filled by Participant

Clearance required for:

- Final Transcript (FT) Inter School Program Change Semester Leave Leaving University

ID No:

Date:

Last Name/Surname: _____ First Name: _____ Middle Name: _____

Program (current): _____ Semester: Spring / Summer / Fall

Email: _____ Contact No: _____

Address (Home): _____

Student's Signature: _____

To be filled by KU Head/ Advisor

Specialization/ Thesis Title: _____

KU Head /Advisor Signature: _____

For office use only

Total Credit Hours completed: _____ CGPA: _____

Departmental Clearance

Name of Department	Signatures (authorized) with date	Office Stamp
Office of Controller of Examinations (OCE)		
Learning Resource Centre (LRC)		
Information Processing Centre (IPC)		
Office of Participants Affairs (OPA)		
Office of Technology Enablement (OTE)		
Office of Corporate Linkages and Placements (OCLP)		
Office of Treasurer (OTR)		
Labs (Engineering Students Only)		
Scholarship Dept. (Financial Assistance only)		
Hostel (UMT Hostel Residents only)		
Office of the Registrar (ORG)		

Note: For Ft Clearance 3 backside Attested Pictures (white background and formal dressing), (2 Attested Copies of Academic Degrees of Matric, Inter, Bachelor, Master & CNIC), (2 Attested Copies UGAT (GAT) only MPhil), UMT student card.