

UNIVERSITY OF DAR ES SALAAM COMPUTING CENTRE.

STUDENT CLEARANCE FORM-BRANCHES

DIPLOMA/CERTIFICATE IN BUSINESS INFORMATION TECHNOLOGY (CBIT/DBIT)

DATE:

NAME:

CENTRE/Branch:

Course:

Session:Class Code.....

LOCATION /SECTION	COMMENTS	SIGNATURE	DATE
Branch Manager			
Branch Academic Coordinator			
CISCO Coordinator			
Workshop			
UDSM Library Services			

FOR: TRAINING OFFICE REMARK (S) ONLY

I certify that the above named student is cleared/not cleared.

Name:

Signature

Position- Training Services Manager

NB: This FORM should be submitted to Examination office, room number (G08) UCC-Headquarters',
Mliman Campus together with Transcript Request Form

***However once your certificate is ready you will be required to collect it from the same office
mentioned above on Wednesday and Friday only.***