



HUMAN RESOURCE

CLEARANCE FORM (TO BE FILLED IN DUPLICATE)

PART A: MEMBER OF STAFF CLEARING

Name of officer leaving PF. No.

Signature: Date:

Designation:

Reason for leaving University

PART B: HEAD OF UNIT

This officer is under my immediate supervision and I confirm that he /she has no liabilities with the .

Verified by..... Sign..... Date.....

PART C: LIBRARY

All books returned / not returned Charge Kshs:

Verified by: Sign: Date:

PART D: ESTATES/CENTRAL SERVICE/TRANSPORT

I confirm that this officer has no liabilities with the section.

Verified by Sign

PART E: STORES

I confirm that this officer has no liabilities with the section

Verified by:..... Sign:

PART F: PROCUREMENT

I confirm that this officer has no liabilities with the section

Verified by:..... Sign:

PART G: HEAD OF AUDIT

I confirm that this officer has no liabilities with the section

Verified by:..... Sign:

PART H: HOSTELS AND CATERING

I confirm that this officer has no liabilities with the section

Verified by:..... Sign:

PART I: OFF CAMPUS LEARNING CENTRE

I confirm that this officer has no liabilities with the section

Verified by:..... Sign:

PART J: REGISTRAR ACADEMICS

I confirm that this officer has no liabilities with the section

Verified by:..... Sign:

PART K: UNIVERSITY FARM

I confirm that this officer has no liabilities with the section

Verified by:..... Sign:

PART L: RUSCO SACCO

Loans Balance Kshs.

Verified by: Sign: Date:

PART M: HEALTH SERVICES

Medical and other outstanding bills Kshs.

Verified by: sign: Date:.....

PART N: ICT

I confirm that this officer has no liabilities with the section

Verified by:..... Sign:

PART O: PERSONAL CLAIMS SECTION

Outstanding amount of imprest Kshs.

Verified by: Sign Date

PART P: REVENUE SECTION

Outstanding Invoices Kshs.

Verified by: sign Date

PART Q: HUMAN RESOURCE SECTION

Number of leave days balance

Staff Identification Card Returned/Not Returned Charge Ksh.

Verified by Sign Date:

PARTR: SALARY SECTION

(i) Outstanding salary advance

(ii) Salary has been stopped with effect from

(iii) Salary overpayment amounts to Kshs.

Verified by Sign Date

PART S: FINANCE OFFICER

Signature.....Date.....

PART T: AUTHORISED / APPROVED

DEPUTY VICE CHANCELLOR - ADMINISTRATION, FINANCE & PLANNING

Signature:.....Date:.....