

DEGREE CLEARANCE SLIP AA/02/9.03

STUDENT NAME	
STUDENT NUMBER	
TELEPHONE NUMBER	
PROGRAM OF STUDY	
DATE OF GRADUATION	
DEGREE AWARDED <i>(please tick where appropriate)</i>	<input type="checkbox"/> CERTIFICATE <input type="checkbox"/> DIPLOMA/ΔΙΠΛΩΜΑ <input type="checkbox"/> ASSOCIATE <input type="checkbox"/> BACHELOR/ΠΤΥΧΙΟ <input type="checkbox"/> ΑΝΩΤΕΡΟ ΔΙΠΛΩΜΑ <input type="checkbox"/> MASTER
DEGREE INDEX NUMBER	

STUDENT SIGNATURE **DATE COLLECTED**

FOR INTERNAL USE

THIS IS TO CERTIFY THAT THE STUDENT HAS CLEARED ALL FEES/OBLIGATIONS IN OUR DEPARTMENT/OFFICE AND IS ELIGIBLE TO RECEIVE THE DEGREE

DEPARTMENT/OFFICE	OFFICIAL SIGNATURE	DATE
LIBRARY		
STUDENT AFFAIRS		
COMPUTER CENTER		
ADMISSIONS		
FINANCE		
ACADEMIC AFFAIRS		