## UNIVERSITY OF BALOCHISTAN, QUETTA Sub Campus, Mastung



## Sub Campus, Mastung Clearance Certificate for Result Card, Transcript of Study & Degree

		SECTION	N-A		
Name	e (IN BLOCK LETTERS)	:			
	r's Name	:			
Address (Permanent)		:			
Unive	ersity Registration No	:			
Acad	emic Session				
Department		:			
Program of Study		:			
Boarder/Non-Boarder:					
				(Si	ignature of the Student)
		SECTION			
		othing is outstanding ag			
	Miss:				
Stude	ent of class	ss and Department			
		Morning	Evening		
1.	HEAD OF DEPARTM	ENT (SUB CAMPUS MASTUN	(G)		
2.	FINANCE DEPARTMENT (SUB CAMPUS MASTUNG)				
3.	ADMIN OFFICER (SUB CAMPUS MASTUNG)				
4.	LIBRARIAN (SUB CAMP	US MASTUNG)			
		SECTION-C (Applicab	ble in case of Bo	arder)	
	Certified that he/sh	e has vacated &	handed	over the	possession of Room
No:					•
	to the resident				
	el & mess, and he / she do				•
(Host	tel Accounts Clerk)	(Hostel Office	Superinten	dent)	Resident Warden Block No:

**DIRECTOR CAMPUS**