



Maduka
UNIVERSITY

ATTACH
PASSPORT
HERE

YEAR II CLEARANCE FORM FOR 2025/2026 SESSION

NAME: DATE:

DEPARTMENT: MATRIC.NO.:

PHONE NO.: EMAIL:

STATE OF ORIGIN: L.G.A:

PARENT/SPONSOR'S PHONE NO(S) :

BURSARY UNIT

CLEARED: YES ☐ NO ☐

CHECKEDBY..... DATESIGN:.....

MEDICAL UNIT

CLEARED: YES ☐ NO ☐

CHECKED BY: DATE SIGN

ACADEMIC UNIT

PREVIOUS DEPT: NEW DEPT:

CLEARED: YES ☐ NO ☐

CHECKED BY DATE..... SIGN

STUDENT AFFAIRS UNIT

CLEARED: YES NO ☐ ☐

CHECKED BY:

ROOM NUMBER: ROOM TYPE:

CHECK-IN DATE:

DATE: SIGN:

REGISTRAR

CHECKED BY..... DATE..... SIGN.....



Maduka
UNIVERSITY

JUPEB (A' LEVEL) CLEARANCE FORM FOR 2025/2026 SESSION

NAME: DATE:

DEPARTMENT: MATRIC.NO.:PHONE NO.:

EMAIL:STATE OF ORIGIN: L.G.A:

PARENT/SPONSOR'S NAME/ PHONE NO(S) :

BURSARY UNIT

CLEARED: YES ☐ NO ☐

CHECKED BY..... DATESIGN:.....

MEDICAL UNIT

CLEARED: YES ☐ NO ☐

CHECKED BY: DATE SIGN

ACADEMIC UNIT

PREVIOUS DEPT: NEW DEPT:

SUBJECTS COMBINATION:

CLEARED: YES ☐ NO ☐

CHECKED BY DATE..... SIGN

STUDENT AFFAIRS UNIT

CLEARED: YES NO ☐ ☐

CHECKED BY:

ROOM NUMBER: ROOM TYPE:

CHECK-IN DATE:

DATE: SIGN:

REGISTRAR

CHECKED BY..... DATE..... SIGN.....

