



HAMDARD UNIVERSITY

ISLAMABAD CAMPUS

23 – East, Fazal-ul-Haq Road Blue Area Islamabad

Tel # 051-2604387-9, Fax # 2604386

HU/IC/DA/201_____

Dated : ____/____/201____

FINAL CLEARANCE CERTIFICATE

(STUDENTS)

It is certified that there is nothing outstanding against.

Mr. / Miss. / Mrs. _____ Son / Daughter of: _____

Student of (Course) _____ Department: _____ Session: _____

Enrollment No. _____ at the time when he / she is leaving the University.

- 1) Lab In charge Pharmacy:- _____
- 2) System Administrator:- _____
- 3) Admin Officer (Academics) _____
- 4) Manager Students Affairs:- _____
- 5) Library:- _____
- 6) Accountant:- _____
- 7) Deputy Controller of Examination:- _____
- 8) Director of the Institute:- _____
- 9) Director Administration:- _____

Signature of Student

Dated : ____/____/____

* Write N/A for not applicable

Director General

Final Lab Clearance Form

It is certified that there is nothing outstanding against Mr./Miss. _____ S/o-

D/o _____ Student of _____ Session _____

1. Pharmaceutical Chemistry Laboratory

i) Lab Attendant _____ ii) Teaching Assistant _____ iii) Lab Incharge _____

2. Pharmaceutics Laboratory

i) Lab Attendant _____ ii) Teaching Assistant _____ iii) Lab Incharge _____

3. Microbiology / Pharmacognosy Laboratory

i) Lab Attendant _____ ii) Teaching Assistant _____ iii) Lab Incharge _____

4. Quality Control / Instrumental Laboratory

i) Lab Attendant _____ ii) Teaching Assistant _____ iii) Lab Incharge _____

5. Industrial Laboratory

i) Lab Attendant _____ ii) Teaching Assistant _____ iii) Lab Incharge _____

6. Physiology / Pharmacology Laboratory

i) Lab Attendant _____ ii) Teaching Assistant _____ iii) Lab Incharge _____

Signature of Student: _____

Date: _____

Incharge Examinations: _____

Director: _____