

**Deshbandhu College**  
Kalkaji, New Delhi-110019

CLEARANCE FORM

Name :- \_\_\_\_\_

Designation :- \_\_\_\_\_

Department :- \_\_\_\_\_

Date of Retirement/Leaving :- \_\_\_\_\_

University Library :- \_\_\_\_\_

College Library :- \_\_\_\_\_

Teacher Incharge :- \_\_\_\_\_

S.O. (Admn.) :- \_\_\_\_\_

(Signature)

Date: \_\_\_\_\_