

FINANCIAL CLEARANCE CERTIFICATE

Name of learner:	
Name of account holder:	
Identity number:	
Telephone number:	

- To be completed by the Head/Bursar of Financial Department of current school.
- Please attach a copy of your statement with the school for the current year.

Is the account holder in g school fees? Yes	ood standing with your institution regarding No
Comments:	

Please e-mail the completed form to secretary.edva@gmail.com

Thank you for your cooperation.

Signature of Head/Bursar

School Stamp

Date