## **Dormitory Exit Clearance Form**

Full Name							
Student ID							
Dormitory Name/No.							
Dominory Name/No.							
Room Number							
Contact Number							
Date of Leaving							
-							
Reason for Exit							
Room Condition Checklist							
Item	Good	Damaged	Remarks				
Bed			1 33334333				
Desk & Chair							
Wardrobe							
Fan/AC							
Lighting							
Other							
		'	'				
Remarks (if any)							
Student Signature & Date							
	Studer	nt Signature & Date					