



DATA LINK INSTITUTE
OF BUSINESS AND TECHNOLOGY

P.O. BOX 2481, TEMA, GHANA

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www.datalink.edu.gh

CLEARANCE FORM

Name: _____ Student ID: _____

Programme: _____ Option: _____

Campus: _____ Contact No: _____

Session: _____ Academic Year: _____

Level: _____ Semester: _____

FINANCE DEPARTMENT

This is to certify that

Mr./Miss./Mrs: _____

Has fulfilled all financial requirements of the university.

Name of Officer: _____ Signature: _____

HEAD OF DEPARTMENT

This is to certify that

Mr./Miss./Mrs: _____

Has fulfilled all financial requirements of the university.

Name of Officer: _____ Signature: _____

LIBRARY

This is to certify that

Mr./Miss./Mrs: _____

Has fulfilled all financial requirements of the university.

Name of Officer: _____ Signature: _____



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STUDENT REQUEST FORM

Instructions	<ol style="list-style-type: none"> 1. Complete application form clearly 2. Pay for the request at accounts office where applicable 3. Present request form at Customer Service Desk 4. Collect response within 3 working days after submitting an appropriate identification card
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Surname(Mr./Mrs./Miss):	Identification No:	Programme of Study:
Other Names:	Level: Session:	Option:
Campus:		Contact No:
Destination Address(Address where document will be sent):		

Types of Request (Please tick appropriate box)	ITEM	No. of Copies	Fee
	1	Letter of Attestation	€20.00
	2	Transcript	€50.00
	3	Internship Letter	Free
	4	Authentication of Certificate(per copy)	€5.00
	5	Additional copy of Authenticated certificate	€5.00
	6	Letter of Introduction(Visa)	€50.00
	7	Letter of Introduction (Express)	€100.00
	8	General Letter of Introduction	€10.00
	9	Letter of Resident Permit	€10.00
	10	Renewal of Resident Permit	€10.00
	11	Introduction Letter to Banks	Free
	12	Letter of Introduction (Project work) State Project Topic:	Free
	13	Statement of Results	€10.00
	14	Recommendation Letters(Tick appropriate option) (i) School: State intended programme of study (ii) Employment (iii) Scholarship for studies	Free
	15	Others(Please specify)	
		TOTAL PAYABLES	

You must sign this form certifying that the information you provided is true. Misrepresentation of facts in connection with this form may be sufficient cause, in and itself, for cancellation of the request and sanctions.	
Student's Signature:	Date:

where applicable, please attach a copy of your receipt when submitting this form.