

SHRIJAGDISHPRASAD JHABARAMAL TIBREWALA

UNIVERSITY

VidyaNagari, Jhunjhunu-333001, Rajasthan

No-Dues Form

Name of Student:		
Father's Name:		
Course & Branch:		
Year & Semester:		
Tear & Semester.		
Roll No.:	o.:Enrollment No.:	

Date:

Signature of Student

This is certified that He/She has cleared all the dues of the Department.

S. No.	Department	Name of In-Charge	Remarks	Signature with Date
1.	Labs of Concerned Department			
2.	Library			
3.	Girls/Boys Hostel			
4.	Head of Department			
5.	Accounts			
6.	Exam Cell			