MPS STUDENT CLEARANCE FORM

PLEASE FILL OUT BOTH PAGES OF THIS FORM, AND RETURN IT TO THE MPS OFFICE.

NAME: ___________________________ DATE: ______________

Last Name First Name M.I.

STUDENT C#: ______________________ TRACK: ______________________

CHAIR: ___________________________ EXPECTED DATE OF DEPARTURE: _________

To be cleared for graduation, you must have a representative from each office noted below sign and date this form. The MPS office will sign off last after the student submits the document with all other signatures. All signatures must be provided on one page.

LIBRARIES: All books, documents, and technology borrowed have been returned, or satisfactory arrangements have been agreed upon.

RSMAS LIBRARY (Second floor of Science, Lab, and Administrative Building (SLAB)) (libcirc@rsmas.miami.edu)

SIGNED: ___________________________ DATE: ______________

RICHTER LIBRARY (RSMAS LIBRARY CAN SIGN FOR RICHTER)

SIGNED: ___________________________ DATE: ______________

DIGITAL PRINT FACILITY (PRINT SHOP, S Grosvenor, First Floor): There are no outstanding balances. Doug Tyrrell (yanina@iadigitalprint.com)

SIGNED: ___________________________ DATE: ______________

FACILITIES & OPERATIONS (N Grosvenor 103): Student ID card has been returned. (facilities@rsmas.miami.edu)

SIGNED: ___________________________ DATE: ______________

REMOVE LOCK FROM LOCKER (MPS Office, S/A 132): Lock returned to the MPS Office (if applicable)

SIGNED: ___________________________ DATE: ______________

EQUIPMENT (MPS Office, S/A 132): All equipment has been returned.

SIGNED: ___________________________ DATE: ______________
FORWARDING INFORMATION

NAME: ____________________________________________

                      Last Name                First Name               M.I.

ADDRESS: ____________________________________________

                      City                        State                  Zip Code

PHONE NUMBER: ____________________________________________

PERSONAL EMAIL: ____________________________________________

PROFESSIONAL WEBSITE AND/OR LINKEDIN PROFILE: ______________

EMPLOYER: ____________________________________________

POSITION/TITLE: ____________________________________________

EMPLOYER ADDRESS: ____________________________________________

EMPLOYER EMAIL: ____________________________________________

COMPANY/ORGANIZATION WEBSITE: ____________________________________________

If you do not have this information when you submit your Clearance Form, feel welcome to update us on your employment after graduation. Information can be emailed to the MPS office at mps@rsmas.miami.edu.