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| **نموذج براءة ذمة** | **رقم النموذج** | DSA-06-31-02 |
| **رقم وتاريخ الإصدار** | 2/3/24/2022/2963  5/12/2022 |
| **رقم وتاريخ المراجعة أو التعديل** | 2(9/7/2023) |
| **رقم قرار اعتماد مجلس العمداء** | 2/3/24/2023/3010 |
| **تاريخ قرار اعتماد مجلس العمداء** | 2/10/2023 |
| **عدد الصفحات** | 03 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| |  |  | | --- | --- | | **الاسم: .................................................................................................** | **الرقم الجامعي: ..................................................................................** |  1. **ملاحظات مشرفة الطابق:**  |  |  | | --- | --- | | تاريخ تسليم الغرفة: / / | الإيجار مدفوع لغاية: / / | | الهاتف مدفوع لغاية: / / | مبيت مؤقت: ( ) | | تنظيف ( ) انترنت ( ) | قيمة التأمينات ( ) كتابة ( ) |  1. **ملاحظات رئيس الشعبة:**   ......................................................................................................................................................................  ......................................................................................................................................................................  ......................................................................................................................................................................  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سكن ................................... والمستأجرة  من قبل الطالبة ..........................................................................، وتبين بعد التفقد أن وضع الغرفة كالآتي:   |  |  |  |  | | --- | --- | --- | --- | |  |  | 11. |  | |  |  | 12. |  | |  |  | 13. |  | |  |  | 14. |  | |  |  | 15. |  | |  |  | 16. |  | |  |  | 17. |  | |  |  | 18. |  | |  |  | 19. |  | |  |  | 20. |  |   **وعليه فقد قررت تقديم التوصيات الآتية:-**  ......................................................................................................................................................................  ......................................................................................................................................................................  ......................................................................................................................................................................  ......................................................................................................................................................................  ......................................................................................................................................................................  ......................................................................................................................................................................   |  |  |  | | --- | --- | --- | | **المشرفة المناوبة** | **فني الصيانة** | **رئيس الشعبة** | | **...............................................** | **...............................................** | **...............................................** |  1. **ملاحظات أمين المستودع:**   يخصم مبلغ ( ) دينار بدل استهلاك وخدمات وتنظيف + ( ) دينار فاتورة هاتف شهر .............   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **اسم المادة** | **العدد** | **السعر** | **اسم المادة** | **العدد** | **السعر** | | بدل استهلاك وخدمات وتنظيف |  |  |  |  |  | | فواتير هاتف |  |  |  |  |  | | **(أخرى)** | | | | | | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | |  |  |  |  |  |  | | **المجموع** |  | | | | |   بريئة الذمة بعد خصم المبلغ ( ) دينار من التأمينات الخاصة بالطالبة:  ......................................................................................................................................................................  ......................................................................................................................................................................   1. **ملاحظات مديرة دائرة المنازل الداخلية:**   ......................................................................................................................................................................  ......................................................................................................................................................................  ......................................................................................................................................................................  ......................................................................................................................................................................  **الاسم:** ................................................................. **التوقيع:** ................................ **التاريخ:** ............................. |