

**River Valley Community College)**  
**One College Drive; Claremont, NH 03743-9707**  
**438 Washington Street; Keene, NH 03431**  
**Fax: (603) 543-1844**

**VERIFICATION REQUEST**

I would like a letter verifying that I am a:

\_\_\_\_\_ full-time student      \_\_\_\_\_ part-time student

Semester/Year: \_\_\_\_\_

Student's Name: \_\_\_\_\_  
Print Name

Mailing Address: \_\_\_\_\_  
Street  
\_\_\_\_\_  
City/State/Zip Code

Daytime Phone: \_\_\_\_\_

Student ID#: \_\_\_\_\_

Program (if applicable): \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

- \_\_\_\_\_ I will pick up the verification letter at the College.
- \_\_\_\_\_ Please mail the verification letter to me at the above address.
- \_\_\_\_\_ Please mail the verification letter to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_