
What is Academic Amnesty?

Academic Amnesty is an instructional policy that allows qualifying students the opportunity to remove academically poor coursework from the calculation of their grade point average (GPA). Students must apply for Academic Amnesty **before** the start of the second semester after readmission.

A student who has previously attended River Valley Community College (formerly NHCTC-Claremont) and is admitted at a later time may be eligible for Academic Amnesty, which provides for the following:

1. All grades taken during the student's previous time at the college will no longer be used to calculate the student's new cumulative GPA. However, grades C- and above taken during the student's previous time at the Institute/College will be used to meet course requirements (where appropriate), subject to the approval of the Vice President of Academic Affairs.
2. Even though previous grades will not be used to calculate the new cumulative GPA, all previous grades will remain on the student's transcript. In order to be eligible for Academic Amnesty, a student must meet all of the following conditions:
 - The student has not taken any courses at the original college of enrollment for a period of at least 3 years from the last semester of attendance.
 - The student applies for Academic Amnesty before the start of his/her second semester after readmission.
 - The student has never before received Academic Amnesty.
 - The student achieved a cumulative GPA below 1.7 during previous attendance.

How to request Academic Amnesty

You must make your request in writing to RVCC using the attached *Academic Amnesty Request Form*. Complete the form and return it to the Office of Academic Affairs.

For more information

Contact Office of Academic Affairs for more information.

Academic Support Specialist, cgorman@ccsnh.edu 603-542-7744, ext. 5423

Interim Vice President of Academic Affairs, shenderson@ccsnh.edu 603-542-7744 ext.5313
(9/10/15)



**ACADEMIC AMNESTY
REQUEST FORM**

Date: _____

Name: _____ Student ID# _____

Address: _____

Phone: _____ Email _____

Name at the time you attended college (if different): _____

Period for which you are seeking amnesty: _____

Explain your reasons for seeking academic amnesty:

Signature of student

Date

**Return the completed form to Office of Academic Affairs,
River Valley Community College, One College Place, Claremont, NH 03743.**

For office use only:

Date Received: _____ *Amnesty Granted?* Yes _____ No _____

Academic Advisor: _____ *Date:* _____

VP Academic Affairs: _____ *Date:* _____

Copy of this form with response sent to Student requesting amnesty (date) _____

Copy of this form to Program Director (name) _____ *(date)* _____