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River Valley Community College
1 College Place, Claremont, NH 03743
438 Washington Street, Keene, NH 03431
15 Hanover Street, Lebanon, NH 03766

www.rivervalley.edu 603-542-7744 rivervalley@ccsnh.edu

INTENT TO GRADUATE 2018-2019

A _____, _____
Student ID# Last Name First Name MI

Address: _____
Street/PO Box, Apt # City State Zip Code

Email Address: _____ Telephone #: _____

Academic Program: _____ Associate Degree ____ Certificate ____
(Please submit a separate form for each program you intend to graduate from.)

Name exactly as you would like it to appear on your diploma:

(Please print clearly. This is where you can decide if you want your middle name or initial, a formal first name or a shortened version, etc.)

Anticipated Graduation Date:

___ May 2019* Intent to Graduate form due February 1, 2019

___ August 2019* Intent to Graduate form due March 1, 2019

(*See Student Handbook for information on graduation requirements and policies)

Do you plan to participate in the graduation ceremony on May 17, 2019? ___Yes ___No

Are you a member of the Phi Theta Kappa Honor Society? ___Yes ___No

Student Signature: _____ **Date:** _____

Advisor Signature: _____ **Date:** _____

Please email this completely filled out and signed form to: RVCCRegistrar@ccsnh.edu
You may also fax it to: (603) 543-1844 or Mail it to: RVCC, Attn: Registrar's Office, 1 College Place, Claremont, NH, 03743

Registrar's Office Use Only

Notes: