



1 College Place, Claremont, NH 03743  
 with Academic Centers in Keene, NH & Lebanon, NH  
[www.rivervalley.edu](http://www.rivervalley.edu) 603-542-7744 [rivervalley@ccsnh.edu](mailto:rivervalley@ccsnh.edu)

**PROGRAM CHANGE OR ADD FORM**

Students shall use this form to add or change their academic program. Student shall fill out form completely including obtaining the necessary signatures before submitting this form to the Admissions Office: [RVCCAdmissions@ccsnh.edu](mailto:RVCCAdmissions@ccsnh.edu).

A \_\_\_\_\_, \_\_\_\_\_  
 Student ID# Last Name First Name MI

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

Email Address: \_\_\_\_\_

Cellphone #: \_\_\_\_\_ Home Phone # (if available): \_\_\_\_\_

I am currently enrolled in the following program(s) and would like to continue in or withdraw as indicated:

	Degree	Certificate	Continue	Withdraw
	Degree	Certificate	Continue	Withdraw
	Degree	Certificate	Continue	Withdraw

I request admission to the following program(s):

	Degree	Certificate
	Degree	Certificate
	Degree	Certificate

By my signature below, I understand that:

1. This request will be reviewed by the appropriate College officials; it is not a guarantee of acceptance.
2. I will not be withdrawn from a program until I am matriculated into another (above listed) program.
3. Courses previously taken at RVCC may not transfer to my new program.
4. Courses previously transferred to RVCC may not transfer to my new program.

**Student Signature & Date:** \_\_\_\_\_

**Current Advisor Signature & Date:** \_\_\_\_\_

**Additional Current Advisor Signature & Date:** \_\_\_\_\_  
 (if applicable)

**Future Advisor Signature & Date:** \_\_\_\_\_  
 (Signature of future advisor indicates acknowledgement of application and not acceptance)

**Additional Future Advisor Signature & Date:** \_\_\_\_\_  
 (if applicable) (Signature of future advisor indicates acknowledgement of application and not acceptance)

Please email this completely filled out and **signed** form to: [RVCCAdmissions@ccsnh.edu](mailto:RVCCAdmissions@ccsnh.edu)  
 You may also fax it to: (603) 543-1844 or Mail it to: RVCC, Attn: Admissions Office, 1 College Place, Claremont, NH, 03743

Notes: \_\_\_\_\_