



1 College Place, Claremont, NH 03743
with Academic Centers in Keene, NH & Lebanon, NH
www.rivervalley.edu 603-542-7744 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.

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): _____ Semester: _____

	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 I will not be withdrawn from a program until I am matriculated into another (above listed) program.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
You may also fax it to: (603) 543-1844 or Mail it to: RVCC, Attn: Admissions Office, 1 College Place, Claremont, NH, 03743

Notes: _____