



Withdrawal / HDYH RI \$EVHQF

Completed forms to be submitted to:
The Office of the Registrar
420 S. Main St.
Nashua, NH 03060
asktheregistrar@rivier.edu
603/897-8218

STUDENT INFORMATION

ID Number: A00000

First Name:

MI

Last Name

Address (City, ST, Zip)

Phone: Home

and/or Cell

College Level:

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Student has contacted the following office:

Student Financial Services

Advising/Success Coach

5 HVLGHQFH /LIH

, KHDUE\ DXWKRULJH 5LYLHU 8QLYHUVLW\ WR ZLWKGUDZ PH IURP DOO FODV
LQGLFDWHG , DFNQRZOHGJH WKDW GRLQJ VR PD\ DIIHFWWK\UJHD GHDSR\LRQWQ
HQUROOPHQW , ZLOO KDYH WR UHDSO\ WR WKH 8QLYHUVLW\

,I , DP FXUUHQWO\ HQUROOHG LQ WKH 1XUVLQJ SURJUDP , XQGHUVWDQG W
SURJUDP GLUHFWO\ WR WKH 1XUVLQJ 'HSDUWPHQW ZKHQ , DP UH DG\ WR UH
DYDLDEOH EDVLV

6 WXGHQW V Signature:

Date:

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3URJUDP 'LUHFWRU 6LJQDWXUH

*UDGXDWH 6WXGHQWV 2QO\

Date:

Completed document file should be sent to the following offices: Registrar, AVPLE, and
6 W X Gffh and/or Ser vices.

AVPLE OFFICE use only
=Application origin

Advisor/Success
Coach Comments: