



**RIVERLAND**  
Community College

**DROP / ADD / WITHDRAW FORM**

**STUDENT NAME** \_\_\_\_\_ **TECH ID** \_\_\_\_\_ **DATE** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

COURSE ID	SUBJECT	COURSE NBR	SECTION	TRANS	INSTRUCTOR	TERM
						<input type="checkbox"/> FALL
						<input type="checkbox"/> SPRING
						<input type="checkbox"/> SS I
						<input type="checkbox"/> SS II

**TRANSACTION CODE**  
ADD - A DROP - D WITHDRAWL - W

STUDENT SIGNATURE \_\_\_\_\_  
ADVISOR \_\_\_\_\_  
REASON FOR **TOTAL** WITHDRAWAL \_\_\_\_\_

Please Print and mail or fax to: Registrar's Office  
Attn: Chelsea Petersen  
Riverland Community  
College 1900 8<sup>th</sup> Ave NW  
Austin MN 55912  
507-433-0643  
FAX: 507-433-0515

Riverland is asking you to provide information that includes private and/or confidential information under state and federal law. Riverland is asking for this information in order to process this form. You are not legally required to provide the information we are requesting; however, the college may not be able to effectively process this form without it.

Albert Lea Campus  
2200 Riverland Drive  
Albert Lea, MN 56007  
507-379-3300

Austin Campus  
1900 Eighth Avenue NW  
Austin, MN 55912  
507-433-0600

Owatonna College & University Center  
965 Alexander Drive SW  
Owatonna, MN 55060  
507-455-5880

Riverland Community College • 800-247-5039 • TDD 800-627-3529  
www.riverland.edu