Excelsior Community College

Transforming Lives, Nurturing Global Citizens.

OFFICE OF THE REGISTRAR
CONSULTATION FORM

NAME: _____

DATE: _____

ID NUMBER: _____

CONTACT: _____

PROGRAMME: _____

STUDENT ISSUE(S)

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REGISTRAR'S RECOMMENDATION(S)

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STUDENT COMMENTS/AFFIRMATON

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Sign: _____
Registrar

_____
Student

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STUDENT COMMENTS/AFFIRMATION

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Sign: _____
Registrar

_____
Student

Registrar's Consultation Form, F-R/29
Registry, v1.0, June 2022