ACADEMIC PROGRESS PLAN

Please submit the completed document to the department's Staff Graduate Advisor

Student _____ Perm # _____ Date _____

The student is not in good academic standing for the following reason(s):

_____ Coursework Performance (Below 3.0 GPA or 12 or more units of incomplete)

_____ Time-to-degree standard (Over time-to-advance or time-to-degree)

_____ Standards of scholarship (failure to pass master's, doctoral screening, or qualifying examinations; unable to form a master's thesis or doctoral committee; or failure to meet other Departmental standards)
   Please specify: _____

Please list below a detailed plan outlining what the student needs to do in order to correct academic performance including a timeline for completion (or attach a separate document).

Milestone/Goal	Deadline

Please explain how the above milestones/goals will be met so the student can successfully move forward (such as mandatory weekly meetings, attendance of office hours etc.), or attach separate document.

The student and their advisor sign in acknowledgement of the plan:

Student _____   _____
         Signature   *Date*

Personal/Research Advisor _____ _____ _____
                            Signature   *Print Name*   *Date*

Did the student make academic progress since their previous Monitoring/Warning Qtr (if applicable)?: Yes____ No____
If progress was made, do you consider it sufficient – why or why not? If progress was not made, why not?