

ACADEMIC PROGRESS PLAN

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 student needs to do in order to correct academic performance including a timeline for completion (or attach 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* _____

Please submit this document to your department's Staff Graduate Advisor