**Academic Success Action Plan Instructions**

Students who intend to petition an academic dismissal are required to meet with an academic advisor or appropriate department official immediately to develop a remediation plan using an Academic Success Action Plan form. The plan must detail a series of steps to return the student to good academic standing. The plan must be signed by the student and the advisor or a designated official from the student’s home department. The graduate program director will make a recommendation to the Graduate School to readmit or not readmit the student to the program. The Department Chair will make a recommendation if a graduate program director is not available.

The Re-admission Petition and Academic Success Action Plan must be submitted to the Graduate School within 7 days of receiving the dismissal letter. Students should contact their department to determine the procedure for submitting the petition and Academic Success Action Plan to the Graduate School. Some departments prefer to submit the petition and action form to the Graduate School on the student’s behalf while other departments will ask the students to submit the forms directly to the graduate school.

The Graduate Student Affairs Subcommittee of the Graduate Council will review each petition and make a final recommendation.

**Academic Success Action Plan**

**Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ UID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Academic Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**First Term on Probation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student’s Current GPA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Courses where C or below obtained:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Course** | **Semester Taken** | **Grade Received** | **To be retaken?** | **Next Semester offered?** | **Completed?** |
|  |  |  |  |  |  |
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**Prerequisites/Foundational Courses outstanding (if any):**

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| --- | --- | --- |
| **Course** | **Next Semester offered?** | **Completed?** |
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**Details of Academic Plan:**

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**Course plan:**

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| --- | --- | --- | --- | --- |
| **Term** | **Class** | **Grade Needed** | **Grade Received** | **Achieved?** |
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| --- | --- | --- |
| **Other Actions required:** | **Completion Date** | **Achieved?** |
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**Expected CGPA: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Planned Degree Completion Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Advisor Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Advisor Name (Print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Advisor’s Comments:**

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**Graduate Program Director or Department Chair Recommendation**

* Recommends re-admission to Graduate Program
* Does not recommend re-admission to Graduate Program

**Department Comments:**

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**Program Director /Dept. Chair: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Program Director /Dept. Chair (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**