Academic Improvement Plan

Name:		Date:			
Imp	accordance with Puget Sound academic policy, sorovement Plan. This form is intended for use by considered by the Academic Standards Committening for a second term.	y students and advisors to draft such a	plan. Co	ompliance with the plan will	
The	following factors contributed to my academic	difficulties:			
In c	arrying out my plan for improving my academi	c standing. I will: (Circle all that ann	lv.)		
1.	Enroll for the following schedule (Puget Sour	-	-	dents in academic difficulty):	
	Course	Units Repeat?			
	•				
	•				
	•				
	(Note: Load may be less than 4 units, with 3 units, with 3 units)	nits qualifying as full-time minimum.)	Total =		
2.	Limit my employment and co-curricular comm	nitments as follows:			
3.	Meet with my instructors regularly to be sure	I understand and am meeting expecta	tions in t	heir courses.	
4.	Seek assistance in the following areas from th	assistance in the following areas from the following resources:			
	Service	Resource		those to be used)	
 Time Management Tutoring		Center for Writing, Learning and Teaching Center for Writing, Learning and Teaching			
	WritingStudy Skills (e.g., note taking, reading)	Center for Writing, Learning and Teac Center for Writing, Learning and Teac			
	Study Skills (e.g., note taking, reading)Learning Disability Services	Student Accessibility and Accommoda			
	General Counseling	Counseling, Health and Wellness			
	Health Consultation/EvaluationAdjustment Issues	Counseling, Health and Wellness Counseling, Health and Wellness			
	Student Life Planning	Dean of Students Office			
	 Academic Motivation/Direction 	Academic Advising			
	Career Direction	Career and Employment Services			
5.	Meet with				
6.	Arrange to study in the library or	, where I can give alert a	and undis	stracted attention to my work.	
7.	Turn all assignments in on time.				
8.	Attend my classes faithfully, missing no more	-	entire ter	m.	
9.	Schedule at least 2 hours of study for every hour in class.				
10.	Address the following additional issues (if applicable):				
I agree to abide by the terms of this improvement plan:				Student Signature	
I ha	we discussed this with my advisee and support	this plan:		Advisor Signature	
Д	Advisors may contact Landon Wade at lwade@r	pugetsound.edu with additional inform	nation or	discussions about this plan.	