



Texas College Academic Plan for Satisfactory Academic Progress (SAP) Appeal

			____/____/____
Student Last Name	First Name	Student ID #	Date of Meeting
			____-____-____
Expected Graduation Mo./Yr.		Academic Year (ex. 2016-2017)	Phone Number

Student and Dean/Director to meet and complete plan together:

- **Cumulative GPA (current):** _____
- **Cumulative GPA (needed to retain aid by conclusion of semester):** _____
- **Semester GPA target (needed to improve cumulative GPA required above):** _____

Student Assessment of Obstacles to Academic Success: *(Student to check all that apply)*

Academic	Study Skills	Personal	Family/Social
<input type="checkbox"/> What "worked" in high school no longer works <input type="checkbox"/> Unprepared for exams <input type="checkbox"/> Poor attendance/skipped class <input type="checkbox"/> Tardiness/late for class <input type="checkbox"/> Uncertain about major <input type="checkbox"/> Unaware of campus resources <input type="checkbox"/> Course(s) too advanced <input type="checkbox"/> Other: _____	<input type="checkbox"/> Time management <input type="checkbox"/> Organizational Skills <input type="checkbox"/> Reading Comprehension <input type="checkbox"/> Writing Skills <input type="checkbox"/> Test Taking Anxiety <input type="checkbox"/> Note Taking <input type="checkbox"/> Other: _____	<input type="checkbox"/> Lack of motivation <input type="checkbox"/> Procrastination <input type="checkbox"/> Pressure/stress <input type="checkbox"/> Health Issues <input type="checkbox"/> Disability (diagnosed or possible) <input type="checkbox"/> Financial concerns <input type="checkbox"/> Sports/Extracurricular <input type="checkbox"/> Work (# hrs./wk.: ____) <input type="checkbox"/> Other: _____	<input type="checkbox"/> Homesick <input type="checkbox"/> Difficulty adjusting <input type="checkbox"/> Difficulty making friends <input type="checkbox"/> Roommate issues <input type="checkbox"/> Relationship Issues <input type="checkbox"/> Family Issues <input type="checkbox"/> Other: _____

Student Identification of Changes Needed to Improve Academic Performance: *(Student to complete)*

1. _____
2. _____
3. _____
4. _____

Referrals: (Dean/Director to check all that apply)

<input type="checkbox"/> Career Planning	<input type="checkbox"/> Campus Security
<input type="checkbox"/> Dean of the Lower College	<input type="checkbox"/> Financial Aid
<input type="checkbox"/> Dean of Students	<input type="checkbox"/> Health Center
<input type="checkbox"/> Default Manager	<input type="checkbox"/> Residence Life
<input type="checkbox"/> Dominion R. Glass Library	<input type="checkbox"/> Other:
<input type="checkbox"/> Student Learning Center (SLC)	

Recommendations: (Dean/Director to check all that apply)

<input type="checkbox"/> Utilization of professor's office hours	<input type="checkbox"/> Math Tutor
<input type="checkbox"/> Consider change of major/school	<input type="checkbox"/> Writing Center
<input type="checkbox"/> Consider course withdrawal	<input type="checkbox"/> Peer Tutoring
<input type="checkbox"/> Increase study time	<input type="checkbox"/> Follow up appt. (Date: _____)
<input type="checkbox"/> Identify and utilize study location (i.e.: study lounge, library, etc.)	<input type="checkbox"/> Other
<input type="checkbox"/> Establish peer study group	<input type="checkbox"/> Other

Student Signature

Date

Dean/Director Signature

Date

Please Note: In order for the Financial Aid Appeals Committee to review a student's financial aid appeal (need-based aid only), the *Satisfactory Academic Progress Appeal Form* (www.texascollege.edu), a personal statement from the student and Academic Plan (completed by student and Dean of the Lower College) must be submitted to the Office of Financial Aid by July 1.

Texas College - Satisfactory Academic Progress standards policy: www.texascollege.edu