## ACADEMIC ACTION PLAN



STUDENT INFORMATION



The Academic Improvement Plan is for students on academic probation. Complete this plan to reflect on the past semester and identify resources, skills, and strategies for returning to good academic standing. Submit the form to your Academic Advisor and schedule a meeting to discuss your plan.

ADVISOR'S NAME										
JSU ID										
GPA										
ACADEMIC REGULATIONS										
Class Registration:										
(Initials)I understand that I cannot register for no more than 12/13 credits during the warning/probationary period(Initials)I may not withdraw from any courses during the semester without the consent of my Academic Advisor(Initials) I understand that I cannot receive an Incomplete in any courses during the semester(Initials) I understand that failing courses could affect my academic standing and/or financial aid at JSU, my status as a full time student, and my progress towards degree completion(Initials) I will meet with my Academic Advisor at least twice during the warning/probationary semester to discuss my academic progress.										
$\overline{}$	Credit Hours									
$\longrightarrow$	Credit Hours									

## **ACADEMIC ACTION PLAN**





## STUDENT SELF-ASSESSMENT

personal action plan? Please share any relevant details.  Motivation  Time Management  Study Skills  Reading Skills  Work/Life Balance  Other  Resources List  Please identify which of the following resources you could benefit from in the coming semester.  Academic advising  Physical health support  Career advising  Accommodations for disabilities  Academic tutoring  Support network on campus  Mental health counseling  Plan for Success  Please articulate your plan for success. What are some strategies and resources you believe will help you to be academically successful in your next semester? Please also address the potential obstacles you may fac and your strategies for addressing each of them.	Reflecting on your past semester (s), which of the following skill sets would you like to improve as part of										
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Signature of Student Signature of Advisor Date	be academically successful in your next semester? Please also address the potential obstacles you may face										
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