

ACADEMIC SUCCESS PLAN

THE APPEAL OF YOUR ACADEMIC DISMISSAL ALONG WITH A COPY OF THIS WORKSHEET MUST BE COMPLETED AND SUBMITTED TO YOUR ACADEMIC DEAN'S OFFICE. IF YOU NEED HELP IN COMPLETING OR SUBMITTING THIS FORM, PLEASE CONTACT YOUR ACADEMIC DEAN'S OFFICE.

1. Stude	ent Information	
Name:		
Student ID#:	:	
Preferred Ph	none with area code:	
Ship E-mail a	address:	
College/Scho	ool:	
Academic M	lajor(s):	
Academic M	linor(s) (if applicable):	
Academic Ac	dvisor:	
Previous Sen	mester GPA:	
Cumulative (GPA:	

Academic Appeal. If you believe there were circumstances that caused your academic performance to suffer temporarily, you may submit this appeal to your academic Dean. Successful appeals contain details, thus being no less than 300 words. This appeal must include official documentation, as appropriate, and an accurate phone number that may be used to notify you of the results of your appeal. For example, if the decline in your academic performance is based on a medical issue, your appeal must include supportive medical documentation from a licensed health care professional. Your appeal should include an explanation of:

- The reason(s) why your academic performance suffered;
- The action steps you have taken / will take to remedy the situation;
- How you have taken responsibility for the situation, if applicable.

Write the appeal to your dean here:

2. Academic Success Plan. This worksheet is designed to help you succeed. You must be honest with yourself about the obstacles you face and the commitment and effort you are agreeing to put forth.

Identify Your Top Three Obstacles

In reflecting on your academic performance, identify the obstacles that negatively impacted your grades. Prioritize and number your top three obstacles with #1 being the biggest obstacle to your academic success. You may identify more than three, but prioritize only your top three.

<u>Academic</u>	Personal/Other
□ Ineffective study skills □ Ineffective time management skills □ Unprepared for exams □ What worked in high school doesn't	 ☐ Financial difficulties ☐ Health problems ☐ Use or abuse of alcohol or other substance(s) ☐ Possible learning exceptionality ☐ Difficulty sleeping at night ☐ Pressure, stress, anxiety, or tension ☐ Excessive time spent online (Facebook, YouTube, Gaming, etc.) ☐ Lack of motivation ☐ Working too much (#hours/week) Other
Major/Career □ Uncertain about current major □ Changed major one or more times □ Unsure what jobs are associated with major □ No clear career goals □ Not sure why I'm in school Other	Family/Social Adjustment Roommate issues Personal relationship issues Family situation Moved away from home/homesick Difficulty adjusting to college life Hard to make friends/loneliness Other

Develop a Success Plan

From above, copy your top three obstacles (with #1 representing your biggest obstacle); next, describe the plan you will follow to overcome the obstacle; then, list any challenge(s) that you may encounter and how you will minimize each challenge.

Obstacle	Success Plan. Describe what you	Potential challenge(s)	Strategies to minimize
<u>Example</u> :	will do in order to be successful.		challenges
Ineffective Study	Participate in the CAPS Program	Maintaining contact with	Schedule and attend
Skills	at the Learning Center at the	the staff in the Learning	weekly meetings.
	beginning of the upcoming	Center.	
	semester.		
1.			
2.			
3.			

Class Attendance. Class attendance is attendance during the most recent ser	correlated with academic success. Indicate your overall pattern of class mester.
□100-90%	□ 89-80% □ 79-70% □ 69-60% □ Less than 60%
	resources that you used last semester and the resources you will use in to use to help you succeed (such as the course professor, academic center, etc.)
Resources used last semester:	
Resources that will be used if the	he appeal of my academic dismissal is granted:
Resources:	
Learning Center http://www.ship.edu/learning/	Phone: (717) 477-1484
Phone: (717) 477-1420	Health Center http://www.ship.edu/health_center/
Department listings* http://www.ship.edu/academics/	Phone: (717) 477-1458 'programs/und
ergraduate_programs/	Counseling Center
Office of Accessibility Resource http://www.ship.edu/oar/ Phone: (717) 477-1364	http://www.ship.edu/Counseling_Center/ Phone: (717) 477-1481
Career Center	Connections Program http://www.ship.edu/dean_of_students/office_ of_connection/ Phone: (717) 477-1164
http://www.ship.edu/career/	1 Holle. (727) 177 2201

Student Agreement. If the appeal of my academic dismissal is granted, and by submitting this form, I agree to:

- Complete and submit all assignments on time and attend every class. In the event of an unforeseen circumstance (illness), I agree to notify my professor(s) and/or the Dean's Office.
- Meet with my academic advisor, course professors and utilize academic support services as necessary. I understand that it is my responsibility to schedule and attend these meetings.

- Read and respond to my Ship e-mail on a regular basis for correspondence and updates from my advisor, course professors, and other university personnel.
- Participate in the CAPS Program. (You will receive an email about the program if you are reinstated).

WHEN YOU'VE COMPLETED THIS DOCUMENT:

Save one copy for yourself, and email one copy with your Academic Appeal to your respective Dean's Office.