

Academic Plan – Undergraduate & Graduate Students

Student Information

Student's Name _____ Student ID Number _____

Reason for having to complete the Academic Plan (select all that apply):

- Cumulative GPA below requirements (**Goal:** 2.0 GPA – undergraduate students, 3.0 GPA – graduate students)
- Course Completion Rate (**Goal:** 66.67% Completion Rate – all programs)

Instructions for Advisor:

Thank you for assisting in preparing this academic plan. The student should be present and active in developing their academic plan. All academic plans should lay out the coursework the student will take between now and the end of their next spring semester. The goal(s) listed above must be achievable by the plan below. There is no prescription for how many hours, what GPAs, etc. are required to meet the goal(s), but whatever is prescribed must ensure the goal(s) can be met. You must also ensure that the student can complete their degree before attempting more than 1.5 times (150%) the hours published for their degree in the course catalog.

Copies of degree sheets, transcripts, etc. are not substitutes for the academic plan.

Academic Plan (to be filled out by the student with the help of an academic advisor)

For our purposes, course completion rates and cumulative GPAs are determined from the **Advisor's Transcript (not Official)**.

What is your Program(s) of Study (Degree, major, minor): _____ | _____
 List the published length of your program in credit hours: ____ | ____ How many credit hours remaining to graduate: ____ | ____
 List your current GPA ____ | ____ Current Earned Hours ____ | ____ and Current Attempted Hours ____ | ____
 Calculate your current Course Completion Rate (Earned Hours divided by Attempted Hours) _____ | _____

Answer below how many total hours will you take between now and the end of our next spring semester. Identify how many of those hours will be repeated coursework in which you previously received a failing grade.

Summer 2024	# of Repeated Failed Hours _____ _____	Total # of Hours (including repeats) _____ _____
Fall 2024	# of Repeated Failed Hours _____ _____	Total # of Hours (including repeats) _____ _____
Spring 2025	# of Repeated Failed Hours _____ _____	Total # of Hours (including repeats) _____ _____

ATTENTION: If your appeal is approved, you may not change your academic plan without appealing to the financial aid committee. Unapproved changes will result in a reinstatement of your suspension. Contact Student Financial Services for more information.

Certifications

Student: I have met with my advisor and agree to the academic plan on this form. By successfully following it, I understand how well I must perform in each course to meet my academic goals by the end of next spring. The plan does not guarantee my success in cases where I do not receive the best grade possible.

Student's Signature _____ Date _____

- Advisor:** The academic plan above has the potential to help the student attain the required GPA and completion percentage by the end of the next spring semester.
- The student can successfully complete their academic program(s) before having attempted more than 1.5 times the published length of their program(s).* (*Ex. A student whose degree requires 120 hours to graduate must be able to finish before they attempt 180 hours, or 1.5 times the 120 hours published for their program(s).*)
- *If this is not possible, the Time frame for Degree Completion form must also be completed.

Advisor's Signature _____ Date _____

Additional copies of appeal forms are available at www.mobap.edu/financial-aid/forms