

## PROBATION 2 – Academic/Progress

## **IMPROVEMENT PLAN - Petition**

Counselor:			

· ·	the information be pleting the petition	, make an appointment with	n your counseld	* *		
SEMESTER:	**Your petition	will not be reviewed unless  SPRING	s the entire for	rm has been completed.**  20		
Part I: Information	on					
NAME:	ИЕ: ID #: G00			ID #: G00		
				·		
MAJOR:	MAJOR:Last Semester of Attendance					
<ol> <li>For what</li> <li>What speacedemic</li> </ol>	responses to the for reason(s) did you recific steps will you coload, utilization or	not maintain satisfactory gra	ades/progress? mic performar class, etc.)	nce and/or progress? (e.g., reduced		
<ul><li>2. I have attempt</li><li>3. I have accumul</li><li>4. Calculate your of completion?</li></ul>	lated hou overall pace of cor %	s at Gavilan. I have earned _ rs (credits/units) of 'W', 'I', '	NC', or 'NP'. earned by cred	its attempted. What is your overall pace		
	lc," then click on, ".		•	t take you to reach a 2.0 GPA?  OR credits at grade average		
PART V: Recomm	nended Support Se	rvices/Workshops:				
☐Guide To Under	rstanding Academic	and Progress Probation Work	kshop □Koξ	gnito		
□Math Lab			□Cas	sh Course		
☐Writing Center			□Lea	rning Styles Activity		
□Tutoring			□"Ge	etting Started" series in the Writing Center		
□Campus Study	time		□"Cra	acking the Code" series in the Writing Center		
□SI Session :		<del></del>	□Oth	ner		

## **PART VI: Contract Obligations** ☐ Repeat Course Work: \_\_\_\_\_ ☐ Submit Progress Report(s) By: \_\_\_\_\_ □ Develop Ed Plan By: \_\_\_\_\_ ☐ Meet with Counselor By: ☐ Other: \_\_\_\_\_ ☐ Minimum Grade Point Average: \_\_\_\_\_ PART VII: Review & Sign (Please read the statements below and initial to indicate you understand): \_\_\_\_\_ I understand that once I make a contract with a counselor, I must continue to work with that counselor until I return to, "good academic standing." \_\_\_\_ I understand that if this petition is approved I may be obligated to fulfill additional college requirements in order to maintain my enrollment. (e.g., a mandatory workshop, class repetition, limits on enrollment, etc.) \_\_ I understand that if I do not complete the terms of this contract and continue onto Academic Dismissal, I may not be allowed to return to Gavilan College until I have taken a full term off. Student Signature Date ☐ Petition Approved ☐ Petition <u>NOT</u> Approved **Program Stamp Counselor Signature** Date Counselor notes & recommendations: