

ACADEMIC PROGRESSION PLAN WORKSHEET

Student Name:	Student ID#:
Phone#	BSU Email:
Primary Major:	Concentration:
Total Credits:	CUM GPA:

The Academic Progression Plan is an opportunity for you to identify the problem(s) that contributed to your satisfactory academic performance (SAP) designation. Your ARP will identify and list steps to correct the problem(s) Barriers that may impede academic success (select all that apply).

ACAMEDIC	PERSONAL	SOCIAL
<input type="checkbox"/> Attendance	<input type="checkbox"/> Physical/Mental	<input type="checkbox"/> Extracurricular Activities
<input type="checkbox"/> Incomplete Assignment	<input type="checkbox"/> Financial	<input type="checkbox"/> Excessive Socializing
<input type="checkbox"/> Low Test Grades	<input type="checkbox"/> Sleep	<input type="checkbox"/> Too Much Gaming
<input type="checkbox"/> Improve organizational skills	<input type="checkbox"/> Family Issues	<input type="checkbox"/> Excessive social media
<input type="checkbox"/> Study Skills	<input type="checkbox"/> Identity Issues	<input type="checkbox"/> Roommate Issues
<input type="checkbox"/> Reading/Writing Issues	<input type="checkbox"/> Work Related Issues	<input type="checkbox"/> Substance use/abuse
<input type="checkbox"/> Undeclared Major	<input type="checkbox"/> Fear of Failing	<input type="checkbox"/> Excessive Partying
<input type="checkbox"/> Time Management	<input type="checkbox"/> Pressure/Stress	<input type="checkbox"/> Relationship Issues
<input type="checkbox"/> Unsure of life plans	<input type="checkbox"/> Housing insecurity	<input type="checkbox"/> Other:
<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Transportation	<input type="checkbox"/> Other:
<input type="checkbox"/> Other:		

Add your top three (3) barriers identified above and list two strategies to help maximize your chances of academic success.

Barrier 1:

Strategy 1A:

Strategy 1B:

Barrier 2:

Strategy 2A:

Strategy 2B:

Barrier 3:

Strategy 3A:

Strategy 3B:

Academic Progression Plan					
Semester:			Year:		
Course Prefix (Ex. FRSE)	Course # (Ex. 101)	Course Name	Credits Hours	Repeat Y/N	Target Grade

Notes:

Academic Progression Plan					
Semester:			Year:		
Course Prefix (Ex. FRSE)	Course # (Ex. 101)	Course Name	Credit Hours	Repeat Y/N	Target Grade

Notes:

X

Student Signature

Date

X

Academic Advisor/Retention Coordinator

Date