

**PENN STATE BERKS
ACADEMIC ADVISING CENTER**

ACADEMIC SUCCESS ACTION PLAN ¹

Name: _____ User ID: _____ Date: _____

As per Penn State University Faculty Senate Policy 54-00 Academic Progress, a student will be placed in Academic Warning status when the student fails to earn a minimum 2.00 cumulative GPA. A student in Academic Warning status who fails to earn either a minimum cumulative GPA or a minimum semester GPA of a 2.00 will be placed in Academic Suspension status for two (2) consecutive semesters. [Note: Summer session counts as one (1) semester.] A student returning from academic suspension must apply for re-enrollment and will return to the University in Academic Warning status.

PART 1: Current Status

My current Cumulative GPA is: _____	My most recent Semester GPA was: _____
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PART 2: Self-Reflection Checklist

For each section, check the box next to each statement that applies to you.

<p>Academics/Study Habits</p> <ul style="list-style-type: none"> <input type="checkbox"/> I have difficulty managing my time. <input type="checkbox"/> I'm unsure how to study for college courses. <input type="checkbox"/> I'm unable to understand course content. <input type="checkbox"/> I understand material but have trouble with exams. <input type="checkbox"/> I'm enrolled in too many courses/credits. <input type="checkbox"/> I don't take notes. <input type="checkbox"/> I don't concentrate for long periods of time. <input type="checkbox"/> I don't attend classes regularly. <input type="checkbox"/> I have trouble keeping up with my assigned readings. 	<p>Personal/Social Concerns</p> <ul style="list-style-type: none"> <input type="checkbox"/> I have health concerns that interfere with my studies. <input type="checkbox"/> I have problems with my living situation. <input type="checkbox"/> I have family responsibilities (parent/child). <input type="checkbox"/> I feel anxious, isolated, tired and/or depressed. <input type="checkbox"/> I have trouble sleeping or sleep too much. <input type="checkbox"/> I'm challenged by leaving my family/home. <input type="checkbox"/> I haven't adjusted to Penn State and/or the area. <input type="checkbox"/> I experienced a traumatic event. <input type="checkbox"/> I have other private/personal issues.
<p>Course Content</p> <ul style="list-style-type: none"> <input type="checkbox"/> I'm unable to understand course content. <input type="checkbox"/> I have difficulty with writing papers. <input type="checkbox"/> I have difficulty with mathematics courses. <input type="checkbox"/> I have difficulty with science courses. <input type="checkbox"/> I have difficulty with courses in my major. <input type="checkbox"/> I'm uninterested in course topic(s). <input type="checkbox"/> I have problems with course instructor(s). 	<p>Motivation</p> <ul style="list-style-type: none"> <input type="checkbox"/> I'm not sure why I'm in college. <input type="checkbox"/> I feel tired most of the time. <input type="checkbox"/> I procrastinate when I have work to do. <input type="checkbox"/> I'm only in college because of my parents. <input type="checkbox"/> I spend too much time on entertainment. <input type="checkbox"/> I'd rather be at work than in class. <input type="checkbox"/> I find it difficult to feel motivated.

PART 3: Change Ruler

Answer the following questions where 1 is the least important/confident and 10 is the most important/confident.

How important is changing your habits to your academic success?	1	2	3	4	5	6	7	8	9	10
How ready are you to make changes?	1	2	3	4	5	6	7	8	9	10
How confident are you that you will be able to make changes?	1	2	3	4	5	6	7	8	9	10

PART 4: Action Plan

GOAL 1: _____	Completion Date: _____
Steps to achieve this goal:	
1. _____	
2. _____	
3. _____	
Signature: _____	Date: _____
GOAL 2: _____	Completion Date: _____
Steps to achieve this goal:	
1. _____	
2. _____	
3. _____	
Signature: _____	Date: _____

PART 5: Review Understanding of Consequences

I understand that while in Academic Warning status, a registration hold will be placed on my account and I will not be able to schedule classes for next semester until I have met with my advisor to review the completion of this Action Plan.	Initials: _____
I understand that while in Academic Warning status, if I fail to earn either a minimum cumulative GPA or minimum semester GPA of a 2.00, then I will be academically suspended and, thereby, will not be able to schedule classes at Penn State for two (2) additional consecutive semesters.	Initials: _____
I understand that if I am returning from academic suspension, and I fail to earn either a minimum cumulative GPA or a minimum semester GPA of a 2.00, then I will be academically dismissed and, thereby, will not be able to schedule classes at Penn State for four (4) years.	Initials: _____

PART 6: Follow-Up

My follow-up appointment with my advisor is: _____
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I agree to actively work towards the goals listed above to help myself be a more successful student at Penn State Berks. I understand the Academic Warning hold will remain on my account until my advisor believes I have made sufficient progress towards my goals to have it removed.

Student Signature: _____ Date: _____

¹ Adapted from Penn State Harrisburg’s Advising Center.