

# UNIVERSITY OF MINNESOTA

Crookston Campus

Office of the Registrar

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## ACADEMIC ACTION PLAN UNIVERSITY OF MINNESOTA, CROOKSTON

**DIRECTIONS:** Complete BOTH SIDES of this form by meeting with your assigned academic adviser (first) and then meeting with a Counselor (Student Center 245, Sports Center 140, Owen 270) or SSS Program Adviser (Owen 270).

After completing the form, turn in the signed copy to the Office of the Registrar, Hill 9.

Student Name (Printed)		UMC Student ID #
Student's UMC Address		Student's UMC Campus Post Office Box Number
Student E-mail Address		Student Telephone Number
Academic Adviser's Name	Major (Program Plan)	First Year Student? [ ] Yes [ ] No

Listed below are some possible reasons, behaviors, or circumstances that may have contributed to the academic difficulties that resulted in your academic probation or suspension.

<ul style="list-style-type: none"> <li>▪ Poor math skills (low ACT math score)</li> <li>▪ Inadequate high school preparation for college</li> <li>▪ Poor writing skills</li> <li>▪ Ineffective study for exams</li> <li>▪ Did not read textbook or assigned materials</li> <li>▪ Did not understand course material</li> <li>▪ Did not complete assignments or prepare for class</li> </ul>	<ul style="list-style-type: none"> <li>▪ Completed assignments "late"</li> <li>▪ Experienced health problems</li> <li>▪ Did not attend class regularly</li> <li>▪ Did not utilize tutor, study groups, or extra help available</li> <li>▪ Class load was "too heavy"</li> <li>▪ Did not participate in class discussion</li> <li>▪ Did not take good notes in class</li> <li>▪ Experienced personal problems</li> <li>▪ Disability issues</li> </ul>
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Considering the above factors and your personal circumstances, on the **backside of this page**, describe (1) the nature of your academic problems and (2) your specific plan to overcome these difficulties. Be sure to include how you will take advantage of UMC's personal support and academic assistance services to help you achieve success. (Be very specific. Use additional sheets if necessary.)

**\*\*\* COMPLETE OTHER SIDE \*\*\***

The University of Minnesota is an equal opportunity employer and educator

**Use additional sheets if necessary**

**(1) Describe the nature of your academic problems**

**(2) Describe your specific plan to overcome these difficulties and how you will take advantage of UMC's personal support and academic assistance services.**

**STUDENT SIGNATURE**

**Date**

***Adviser's Review and Comments***

*I have met with the student and, have reviewed, and discussed with her/him their course registration for this term. My suggestions regarding credit load and dropping or adding classes are:*

**ACADEMIC ADVISER'S SIGNATURE**

**Date**

***Counselor's Review and Comments***

*I have met with the student and, have reviewed, and discussed with her/him the reasons, behaviors, or circumstances that may have contributed to their academic difficulties. My suggestions and recommendations are:*

**SIGNATURE - COUNSELOR (STUDENT CENTER 245, SPORTS CENTER 140, OWEN 270) OR SSS PROGRAM ADVISER (OWEN 270)**

**Date**

**SUBMIT TO:**

*Office of the Registrar, University of Minnesota, Crookston, 9 Hill Hall, 2900 University Ave., Crookston, MN 56716-5001*