## ACADEMIC ALERT

Student's Name	Date	Student's Name	Date	
Course Number & Name		Course Number & Name		
<u>Unsatisfactory</u>	<u>Satisfactory</u>	<u>Unsatisfactory</u>	<u>Satisfactory</u>	
Class Attendance			Class Attendance	
Assignments / Preparations for Class		Assignmen	nts / Preparations for Class	
Performance on Quiz / Exam		Perfor	mance on Quiz / Exam	
Motivation to Learn		M	otivation to Learn	
I believe there are personal problems. (Please explain.)		I believe there are personal prol	olems. (Please explain.)	
This student needs assistance in these areas:		This student needs assistance in	these areas:	
These course requirements need to be met:		These course requirements need to be met:		
Professor's Signature:		Professor's Signature:		
AS Office follow-up: email smail phone co	ontact	AS Office follow-up: email	smail phone contact	
Please use this form when a student is having problem:	s in your class	Please use this form when t	a student is having problems in your class	

SEND TO ACADEMIC SUPPORT

OR when an identified "at-risk" student is doing well.

Please use this form when a student is having problems in your class OR when an identified "at-risk" student is doing well.

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