FLORIDA A&M UNIVERSITY
Mid-Semester Academic Progress Report Form

School of General Studies
Freshman and Sophomore Year Experience Program

FALL SEMESTER 2006

Student’s Name: __________________________ Major & Classification: __________________________

Academic Advisement Center Director: Dr. Lisa Lang, 561-2421 (Phone), 599-3706 (Fax), and Lisa.Lang@famu.edu (e-mail)

Professor’s Name: __________________________ Phone Ext. # & e-mail Address: __________________________

Date: ___________ Course Number and Name: __________________________ Course Credit Hours: ___________

NUMBER OF ABSENCES: _______ NUMBER OF TARDIES: _______

Is the student: _______ Passing _______ Barely Passing _______ Failing

If student is not passing, please check the reason:

_____ Poor class attendance _____ Poor performance on quizzes & exams _____ Little or no participation in class

_____ Not turning in assignments _____ Poor background in subject matter _____ Lack of interest in class

If the student is failing, is it possible for him/her to pass the class at this point in the semester? _______ Yes _______ No

If the answer is yes, what are the conditions that the students must meet to pass your class?

__________________________________________________________

__________________________________________________________

Signature __________________________ Date __________________________

PLEASE RETURN BY: Wednesday October 25, 2006

School of General Studies, Dr. Dorothy F. Henderson, Dean
Academic Advisement and Student Support Center
104-A Gore Education Complex
561-2600/2105 (Phone) 599-3706 (Fax)