



**Academic Plan & Path to Success**

**Student Information**

Student's Name \_\_\_\_\_ Student ID Number \_\_\_\_\_

**Reason for having to complete the Academic Plan (select all that apply):**

- Cumulative GPA below 2.0 (Goal: 2.0 GPA)       Course Completion Rate (Goal: 66.67% Completion Rate)

**Instructions for Advisor:**

Thank you for assisting in preparing this academic plan. The student should be present and active in developing their academic plan. All academic plans should lay out the coursework the student will take between now and the end of their next spring semester. The goal(s) listed above must be feasible by what is prescribed. There is no prescription for how many hours, what GPA's, etc. are required to meet the goal(s), but whatever is prescribed must ensure the goal(s) can be met. It would be advised to work through multiple scenarios with the student. For example, if they take 24 hours throughout the remaining semesters, they might need a 2.9 GPA to meet their goal. If they take 30 hours during those semesters instead, they might need a 2.7 GPA.

**Copies of degree sheets, transcripts, etc. are not substitutes for the academic plan.**

**The Plan (to be filled out by the student with the help of an academic advisor)**

Current Attempted Hours \_\_\_\_\_ Current Earned Hours \_\_\_\_\_ Current GPA \_\_\_\_\_

Current Course Completion Rate (Earned Hours divided by Attempted Hours) \_\_\_\_\_

For our purposes, course completion rates and cumulative GPA's are determined from the **Advisor's Transcript**.

Summer 20\_\_\_\_ # of Repeated Hours \_\_\_\_\_ Total # of Hours (including repeats) \_\_\_\_\_

Fall 20\_\_\_\_ # of Repeated Hours \_\_\_\_\_ Total # of Hours (including repeats) \_\_\_\_\_

Spring 20\_\_\_\_ # of Repeated Hours \_\_\_\_\_ Total # of Hours (including repeats) \_\_\_\_\_

Changes to your course selection are permitted, but changes to the number of hours and how many hours are repeated courses must be approved by our committee first. This plan is what the committee will base their decision on. It is not allowed to change if you are reinstated and placed on probation unless appeal to change. Please contact Student Financial Services for more information.

**The Path (to be filled out by the student)**

What is your academic goal here at MBU? \_\_\_\_\_

\_\_\_\_\_

What are you currently doing to ensure your academic success now and in the future? \_\_\_\_\_

\_\_\_\_\_

What campus resources do you plan to use?

- Academic Success Center       Career Services       Chapel Services  
 Academic Advising       MBU Library References  
 Counseling Services       IT Help Desk

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

Advisor's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Office Use Only**  
Date and Time Submitted

**Application Complete? Y N**

Revised 5/11/2017