



## ACADEMIC PROGRESS REPORT

*In an attempt to assist students with achieving academic effectiveness, the Academic & Career Services Office is requesting information for the following student:*

NAME: \_\_\_\_\_ GRADE-TO-DATE: \_\_\_\_\_

COURSE: \_\_\_\_\_

INSTRUCTOR: \_\_\_\_\_

**0 = poor; 1 = below average; 2 = average; 3 = good; 4 = excellent; or N = not applicable**

| ACADEMIC PROGRESS INDICATORS     |   |   |   |   |   |   |
|----------------------------------|---|---|---|---|---|---|
| Class Participation              | 0 | 1 | 2 | 3 | 4 | N |
| Attendance                       | 0 | 1 | 2 | 3 | 4 | N |
| Quality of Submitted Assignments | 0 | 1 | 2 | 3 | 4 | N |
| Timeliness of Submitted Work     | 0 | 1 | 2 | 3 | 4 | N |
| Seeks Assistance                 | 0 | 1 | 2 | 3 | 4 | N |

Student's Strength(s):

Area(s) of Concern:

Future Projects/Papers/Exams:

Student Assistance Needed: (e.g. tutoring, study skills, etc.)

*I hereby grant the Academic & Career Service Office permission to request information regarding my academic performance at Hannibal-LaGrange University. I further acknowledge that all information obtained will be used solely for the purpose of providing academic guidance and advisement. Non-identifiable information may be used in institutional reports. This consent will automatically expire upon written notice or termination of services through the Academic and Career Services Offices.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_