

Rev 11/19/2018

2019/2020 Financial Aid Academic Plan

Stude	nt Name: Student ID:
and p to sit you b to ref more take r difficu	emic success is an ongoing process for most students. Study skills, time management, academic expectations ersonal issues can impact your ability to be successful in the classroom. This action plan is designed for you down with your academic advisor and identify areas that you need help with and then devise steps to help ecome successful and advance towards your degree. Before meeting with your academic advisor, take time lect what is going on with your academics. Are you having trouble managing your time? Are you working than 20 hours a week? Do you have additional responsibilities? Are you struggling to read the materials, or notes in class? Do you understand what the academic expectations are for your course(s)? Are you having alty in one class or several classes? List what you are struggling with and then, in conversation with your emic advisor, develop steps towards your goal.
Belov	are additional areas to think about regarding your academic success.
I.	CLASS ENROLLMENT/ASSIGNMENTS I plan to attend all of my classes. I plan to complete all classroom assignments and submit them on time. I plan to meet with my professors when I have questions about the class. I understand what is expected of me in the classroom.
II.	ACADEMIC ADVISING I plan to meet with my academic advisor to review my academic progress and to strategize about ways to continue being successful. Advisor: Date(s): Time:
III.	TUTORING I am aware of tutoring services offered on both campuses and online, and I plan to use them for the following course(s):
Other	strategies to help me become successful in the classroom:

l,		, in constitution with my academic advisor have worked out a plan of acti	or
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Resou	I understand that my academic success is my responsibility. I will meet with my academic advisor each term to discuss my class schedule for the next term. I understand that if I am receiving financial aid, I agree to adhere to this Action Plan and to meet satisfactory academic progress (SAP) standards for financial aid. Refer to the SAP policy available in Student Services or online at www.cgcc.edu/financial-aid . I understand that if I am receiving financial aid and fail to meet federal financial aid standards, I will no longer be eligible for financial aid at CGCC. Date		
Initial	:		
	l understand that my acade	nic success is my responsibility.	
	I will meet with my academic advisor each term to discuss my class schedule for the next term.		
satisfactory academic progress (SAP) standards for financial aid. Refer to the SAP policy available			
Student Signature		Date	
Academic Advisor Signature		Date	 Date

SUBMIT COMPLETED FORM TO THE COLUMBIA GORGE COMMUNITY COLLEGE'S FINANCIAL AID OFFICE

Submit completed form to Columbia Gorge Community College's Financial Aid Office:

Mailing Address: Department of Financial Aid | 400 East Scenic Drive | The Dalles, OR 97058

Fax: Financial Aid Office · 541-506-6021

Email: financialaid@cqcc.edu