

College of Sciences Academic Warning Contract – Mathematics

Name _____ ID# _____ Phone _____ Department _____

My goal for this semester is to: _____

Careers

My top career choice is: _____

My second career choice is: _____

The academic path that will best help me in my career is: _____

In order to improve my GPA, I will take greater responsibility for my learning in the following ways (check all that apply):

I will work at my job fewer hours _____ I will study more _____

I will go to tutoring _____ I will have books for all my classes _____

I will attend all classes _____ I will hand in homework on time _____

I will take notes in class _____ I will use a "to do" list and a day planner _____

When I study, I will use all of the following locations: _____

My regularly scheduled study times will be: _____

The number of hours outside of class used for studying will change from _____ to _____ per day

Other things I will do to raise my GPA:

- *
- *
- *
- *

I will learn more effective study habits using the following resources:

Counseling Center _____ Date _____ Time _____

Workshops-test anxiety, study skills, relaxation, and time management (when/where?)

Tutoring (when/where?)

Signing this academic warning form indicates that I am willing to make the indicated changes in order to raise my GPA.

Student Date _____

Academic Advisor Date _____

Undergraduate Director/Coordinator Date _____