



ACADEMIC DIFFICULTY ANALYSIS FORM (GPA: 3.00 & BELOW)

This part to be filled by student and academic advisor:

Advisor Name -----

Student Name ----- Student ID# -----

Department ----- Level -----

Academic year ----- Semester -----

GPA ----- Date -----

Please indicate the course(s) in which you are having difficulties:

Course title	Course number	Course grade

Reasons for student with academic difficulties:

Recommendations to overcome academic difficulties:

Time for next meeting:-----

Student signature:

Advisor signature:

CC: *Academic Vice Dean

*Student File