

Probation Conditions & Plan for Academic Improvement

Students placed on Academic Probation must be re-advised/greenlighted and agree to the following conditions in order to continue enrollment at WTAMU. Failure to comply may result in the deletion of course schedule. Students who have earned less than 30 credit hours must complete the *Probation Conditions & Plan for Academic Improvement* with an adviser in Advising Services (Student Success Center, Room 110 or (806) 651-5300); those who have earned 31 or more credit hours must visit with an academic adviser based on their major's advising model (see www.wtamu.edu/advising).

		the statements below:	

Registrar Office Use Only

Document Imaged and forwarded to appropriate Dean's Office

Academic Probation Conditions						
 When retaking cours It is not recommended A reduced course loa The rights of nondisc 	es, the last grade at WTAMU cour ed to enroll in more than 15 credit d and failing or dropping courses losure under FERPA are waived ar					
Recommendations for Academ	ic Improvement					
 Retake failed courses recommended by the academic adviser to improve overall GPA Attend every class as scheduled and visit with instructors to make up work in case of absences due to school activities and/o personal conflicts Meet with an adviser throughout the semester to ensure academic progress and to discuss choice of major to determine if it appropriate and attainable based on academic achievements and requirements Accept the adviser's recommendation on developmental coursework and referrals for assistance through services including tutoring, supplemental instruction, academic labs, career assessment, personal counseling, etc. 						
Statement of Commitment from the Student						
Please use the space provided below to answer the following question. This portion must be filled out to complete the re-advising/greenlighting process.						
Explain the steps you have tak	en or will take to change your ac	cademic performance next semester.				
Student Printed Name	WT ID #	Advisor Printed Name and Signature				
Student Signature	Date	Academic Department				
Original to be sent by departmenta	al advisor or Advising Services to Regis	strar's Office.				