



ACADEMIC IMPROVEMENT PLAN

FOR USE IN CONSULTATION WITH DESIGNATED PROFESSIONAL ADVISORS ONLY.

This form should be used to complete the Academic Improvement Plan (AIP) required as part of the petition to clear an academic standing hold. Students on suspension, in addition to completing this form, must have sat out for at least one fall or spring term prior to being cleared for suspension. For questions about USM's academic standing policy, please visit usm.edu/registrar/internalportal/faqs-academic-standing.php.

SECTION I: TO BE COMPLETED BY STUDENT

TYPE OF ACADEMIC STANDING HOLD Probation Continued Suspension

PERSONAL AND ACADEMIC INFORMATION

Name Student ID

Email Phone

Current Major

Desired Major (if applicable)

[Current College](#) Arts & Sciences Business & Econ. Dev. Education & Human Sci. Nursing & Health Prof.

Who is your faculty mentor/advisor?

How often do you meet with your faculty mentor/advisor?

Have you discussed your academic performance with your faculty mentor/advisor? Yes No

Are you currently employed? Yes No

If yes, how many hours per week will you work during the semester you're seeking enrollment?

Do you live on campus? Yes No If no, what is your commute time?

ACADEMIC OBSTACLES ASSESSMENT

In reviewing your academic performance, what obstacles have impacted your grades? Please check all that apply. We recognize some of the factors listed below are rather personal. The intent of the questions is to encourage true self-reflection that will identify the changes needed to positively impact your academic performance.

Academic

- Ineffective study skills/unprepared for exams
- Undeveloped time management skills
- What worked in high school does not work anymore
- Difficult classes/not prepared for course level
- Unable to understand course content/relevance
- Unable to understand professor/conflict with professor
- Hard to concentrate/daydreaming
- Registered for too many classes
- Did not attend/skipped class
- Other

Personal

- Financial difficulties
- Health problems
- Hard to get out of bed in the morning
- Use or abuse of alcohol or other substance(s)
- Possible learning disability
- Difficulty sleeping at night
- Pressure, stress, anxiety or tension
- Over-involved with extra-curricular activities
- Lack of Motivation
- Other

Major/Career

- Uncertain about major
- Changed major one or more times
- Not clear career goals
- Not sure why I am in school
- USM may not be the place for me
- Other

Family/Social Adjustment

- Working too much
- Roommate or relationship issues
- Personal/family situation
- Moved away from home/homesick
- Difficulty adjusting to college life
- Hard to make friends/loneliness
- Other

Other Factors Not Listed Above

Please explain in detail the three most significant obstacles that affected your academic performance.

Obstacle

Explain Obstacle's Effect on Your Success

1

2

3

SECTION II: TO BE COMPLETED COLLABORATIVELY BY STUDENT & ADVISOR

If you had a previous academic contract, did you meet your last contract GPA? Yes No N/A

Explain

Last semester enrolled at USM

Total attempted hours

Southern Miss GPA

Note: Professional Advisor, please attach a DPR and an unofficial transcript.

DPR

PLAN OF ACTION

Think about a plan of action for getting the next semester off to a successful start. Include meetings with your advisor and instructors and utilizing campus resources such as the Center for Student Success, university counseling services, and departmental support courses.

Goal

Steps to Reach Goal

Advising Resources (tutoring, professor office hours, etc.)

1

2

3

4

5

Additional Conditions/Comments

By signing below, the student attests that the above information is accurate and a reflection of their intentions and that the student agrees to the terms of this contract that accompanies this form. By signing below, the academic advisor confirms discussion of the above information with the student to complete the academic improvement plan.

INSTRUCTIONS: SIGNING A FORM WITH ADOBE READER

Student's Signature

Date

Professional Advisor's Signature

Date

College Dean or Designee's Signature

Date

Dean's Office should submit completed **AIP** to the [Registrar's Office](#) for final processing.