

## My Academic Success Plan

Student Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

UTRGV Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_

### STEP 1: Identify the obstacles that you encountered during past semesters.

*What obstacles did you encounter in past semesters that made reaching your goals difficult?*

- |  |  |
|--|--|
| <input type="checkbox"/> I did not go to class.  | <input type="checkbox"/> I was homesick.   |
| <input type="checkbox"/> I did not take notes in class.  | <input type="checkbox"/> I had trouble adjusting to college life.                                |
| <input type="checkbox"/> I did not pay attention in class.   | <input type="checkbox"/> I had trouble with my roommate.   |
| <input type="checkbox"/> I did not turn in assignments.  | <input type="checkbox"/> I had health issues.  |
| <input type="checkbox"/> I devoted too much time to a student organization, fraternity, sorority, etc. | <input type="checkbox"/> I broke up with or had relationship problems with my significant other. |
| <input type="checkbox"/> I missed one or more exams.   | <input type="checkbox"/> I had financial problems.   |
| <input type="checkbox"/> I watched too much TV, Netflix, Hulu, etc.                                    | <input type="checkbox"/> I experienced test anxiety.   |
| <input type="checkbox"/> I spent too much time on the internet.  | <input type="checkbox"/> I spent too much time with friends.                                     |
| <input type="checkbox"/> I did not study enough.   | <input type="checkbox"/> I had difficulty balancing work and school.                             |
| <input type="checkbox"/> I did not do my readings.   | <input type="checkbox"/> I did not like my courses.  |
| <input type="checkbox"/> I did not buy my books on time or at all.                                     | <input type="checkbox"/> I was not motivated.  |
| <input type="checkbox"/> I procrastinated.   | <input type="checkbox"/> I was unsure about my major.  |
| <input type="checkbox"/> I was unsure about my academic goals.   | <input type="checkbox"/> I struggled with a learning disability.                                 |
| <input type="checkbox"/> I did not know how to study effectively.                                      | <input type="checkbox"/> I had to take care of an ill family member.                             |
| <input type="checkbox"/> I did not understand the subject matter in one or more of my courses.         | <input type="checkbox"/> I became frustrated with my poor performance and stopped trying.        |
| <input type="checkbox"/> I allowed my substance use to interfere with my academic performance.         | <input type="checkbox"/> I didn't know my academic resources.                                    |

Other obstacles to my academic success: \_\_\_\_\_

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*What unexpected and extenuating circumstances significantly affected your ability to meet the parameters of your probationary status?*

Obstacle	How did it interfere with your academic success? (be specific)
1.	
2.	
3.	

**STEP 2: Generate potential solutions for overcoming your obstacles.**

- |  |  |
|--|--|
| <input type="checkbox"/> I will attend every class.  | <input type="checkbox"/> I will not use my cell phone in class.  |
| <input type="checkbox"/> I will take notes in class.   | <input type="checkbox"/> I will turn in all of my assignments on time.   |
| <input type="checkbox"/> I will go to tutoring at the Learning Center.   | <input type="checkbox"/> I will utilize a weekly planner, digital or printed.  |
| <input type="checkbox"/> I will study in a place that allows me to focus.  | <input type="checkbox"/> I will connect with Student Accessibility Services.   |
| <input type="checkbox"/> I will visit with my L.E.A.P.S. advisor to discuss how I am addressing obstacles I encounter. | <input type="checkbox"/> I will attend Alcoholics Anonymous, Narcotics Anonymous, or other support group meetings.       |
| <input type="checkbox"/> I will visit the UTRGV Counseling Center.   | <input type="checkbox"/> I will meet with my professor on a regular basis.   |
| <input type="checkbox"/> I will complete my readings in a timely manner.   | <input type="checkbox"/> I will dedicate time every week to homework.  |
| <input type="checkbox"/> I will utilize the Writing Center for my essays.  | <input type="checkbox"/> I will create a weekly schedule for myself.   |
| <input type="checkbox"/> I will make wiser decisions regarding substance use.  | <input type="checkbox"/> I will create and/or attend study groups with my peers.   |
| <input type="checkbox"/> I will join a student organization related to my major or career interests.                   | <input type="checkbox"/> I will meet with a Career Advisor to discuss potential vocational and educational goals for me. |

Other solutions that will assist me with being successful: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*You have options! Think about the possible solutions to help address each obstacle! How can you navigate around a roadblock to get to where you want to go?*

<b>Obstacle</b>	<b>Solution #1</b>	<b>Solution #2</b>	<b>Solution #3</b>
1.			
2.			
3.			

**STEP 3: Commit to achievable solutions!**

*Think about your solutions above, which solution will help you the most? Which solution are you most likely to be successful with? What do you need to do for that solution to be successful?*

<b>Solution</b>	<b>How does this solution help me reach my goal?</b>	<b>How much time and effort is needed to make this successful?</b>
1.		
2.		
3.		

## STEP 4: Develop Your Plan!

*What is your primary goal for this coming semester? How can you reach your goal despite your past obstacles? Think about your goal, and consider making a SMART goal using the following guidelines.*

### **S**pecific

Make your goal as specific as possible.

### **M**easurable

Give yourself a way to measure your success. What does success look like? If your goal is to study more, what does "more" mean? How many hours a day or week?

### **A**ttainable

Your goal should be possible. The last thing you want to do is set yourself up for failure.

### **R**ealistic

Recognize your own abilities and if your goal is something that you personally will work towards.

### **T**imely

Set a timeline for your goal. Give yourself a timeframe in which you can achieve your goal.

**MY GOAL:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Now that you have your goal, identify actions you can take to work towards achieving your goal.*

Steps I will take to achieve my goal:

1. \_\_\_\_\_ by this date: \_\_\_\_\_
2. \_\_\_\_\_ by this date: \_\_\_\_\_
3. \_\_\_\_\_ by this date: \_\_\_\_\_
4. \_\_\_\_\_ by this date: \_\_\_\_\_
5. \_\_\_\_\_ by this date: \_\_\_\_\_

## STEP 5: Put in the effort and commit to your own success.

I, \_\_\_\_\_, understand that if my academic suspension appeal is approved I will be required to actively participate in and complete the Learning to Excel with Advising, Planning, and Support (L.E.A.P.S.) Program to help me reach my goals.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*Modified from the Texas Tech University Academic Success Plan\*