Dear EOPS Students,

We hope your semester has gotten off to a great start. Many of you have completed your first counseling appointment and are ready to make your second appointment.

To complete your progress report, please do the following:

Take this form to each of your professors and ask for feedback on how you are doing in the class. (We recommend that you go to the professor during office hours or you also may want to consider leaving the form with the professor and coming back to pick it up.

- If you have an **ONLINE** class, request a grade printout from your instructor and attach it to the progress report form.

- If you had an 8-week class that has just finished, just list the class on the form and put the start date. You do not need to visit the professor.

- If you have an 8-week class that has just started, just list the class on the form and put the start date. You do not need to visit the professor.

- If your professor does not want to provide the feedback, please have him/her initial in the “Decline to Report” box on the form.

- If necessary, make copies of this form. Just turn in all copies at one time.

**You must return this form directly to the EOPS office by the due dates.**

If you have questions, please call us at **(619) 644-7617** or stop by the office.

Sincerely,

EOPS/CARE
# EOPS Academic Progress Report

Take the Academic Progress Report to your instructors Mid-Semester. Bring the completed form to the EOPS Office **By October 4\(^{th}\) in the Fall semester and by March 14\(^{th}\) in the Spring semester.**

 Forgery of this document may lead to removal from Grossmont College.

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<tr>
<th>Student Name</th>
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**Instructor Comments:**
- [ ] Improve attendance/tardiness
- [ ] Low test scores/Missing assignments
- [ ] Currently making satisfactory progress
- [ ] Dropped
- [ ] Recommend assistance with study skills and/or tutoring
- [ ] Other:

**INSTRUCTOR:** If you would like to communicate with a counselor regarding this student, please check here: [ ]

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**PLEASE STOP! DO NOT WRITE INSIDE THIS BOX!!!**

**THIS PORTION TO BE COMPLETED DURING EOPS COUNSELING APPOINTMENT!**

**Counselor Comments:**
__________________________________________________________________________________

**RELEASE OF INFORMATION – WAIVER**

Please initial here____ and sign below to authorize your counselor to communicate with your instructors regarding your progress.

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