Education Development Plan and Academic Contract
For Students on Credit Limit

Date: ___________________ Student Name: ______________________________________
Student JC ID: __________________

Student Success Navigator: ___________________________ Student Success Navigator’s Ext. ______________

Part 1: Overview of Policy and Status (Please initial next to each item as evidence of your understanding.)

I understand that:
_____ I am currently on credit limit and that I will need to achieve at least a cumulative financial aid GPA of 2.0 in all courses attempted.

Part 2: Education Development Plan and Agreement

To demonstrate the good faith in meeting appeal requirements, I need to do the following:

✓ Meet with my Student Success Navigator and review the reasons for my academic difficulties
✓ Establish realistic academic goals based on my unique needs and challenges
✓ Meet as requested with my Student Success Navigator to review progress
✓ Follow-up on agreed upon interventions.

Contact the Center for Student Success, Potter Center, (517)796-8415, for the services indicated:

☐ Tutoring
☐ Study strategies/skills
☐ Time management
☐ Assistance with writing
☐ Special accommodations
☐ Assistance with math
☐ Assistance with reading

I will meet with my Student Success Navigator at the following frequency: Every Semester

Initial ______

For my meetings with my advisor, I will be prepared with the following: Course plan and advising audit

Initial ______

Academic interventions I will do this semester (Course Plan): Maintain a 2.0 in all attempted coursework

Initial ______

Additional academic requirements (specified grades for defined courses) for the semester: Initial ______

Print Student’s Name

JC Student ID

Student’s Signature

Date

____________________________________________________________________________________________

Student Success Navigator’s Signature

Date

☐ Student Copy

☐ Financial Aid Copy