



Soka University of America
Office of the Registrar

LOW GRADE NOTICE

Course #: _____ Course Title: _____

Semester: _____ Instructor: _____

Student's Name: _____
Last First

Please check all that apply:

- | | |
|---|---|
| <input type="checkbox"/> Performing below C- Level | <input type="checkbox"/> Work often submitted late |
| <input type="checkbox"/> Inadequate foundation in subject | <input type="checkbox"/> Lacks motivation |
| <input type="checkbox"/> Behavior problems | <input type="checkbox"/> Poor attendance/frequent tardiness |
| <input type="checkbox"/> Unsatisfactory test grades | <input type="checkbox"/> Unsatisfactory written work |
| <input type="checkbox"/> Inadequate preparation/homework | <input type="checkbox"/> Lack of participation |

Recommended Action(s):

- | | |
|---|---|
| <input type="checkbox"/> Better class preparation | <input type="checkbox"/> Go to Writing Center |
| <input type="checkbox"/> Manage time better | <input type="checkbox"/> Meet with academic advisor |
| <input type="checkbox"/> Make up work | <input type="checkbox"/> Withdraw from course |
| <input type="checkbox"/> Seek tutoring | |
| <input type="checkbox"/> Other: | |

Instructor Signature: _____ Date: _____

Academic Advisor's Comment:

Date Student Contacted: _____ Date Student Interviewed: _____

Action(s) taken:

Advisor Name (PRINT) _____ Signature: _____

Copies: Student; Dean of Faculty; Academic Advisor; Registrar.