

## Academic/Progress Probation Contract

Name:	Birthda	ate: ID#:		
Semester/Year	GPA:Email/Phone:			
Circle current Academic Standing	zs:			
Academic Probation	l <sup>st</sup> semester <b>(AI</b> )	or 2 <sup>nd</sup> semester <b>(A2)</b>		
Progress Probation 1 <sup>st</sup> semester (P1) or 2 <sup>nd</sup> semester (P2)				
Returning from Disr	nissal: Academic or P	rogress		
Major:	jor: Career Goal:			
Fall 20	Spring 20	Summer 20		
Course & Number:	Repeat/Term/Time	es: Units:		
1 2				
3 4				
5				
		Total		

## I agree to do the following to ensure my success at Palo Verde College:

\_\_\_\_ Enroll in \_\_\_\_\_\_ units for \_\_\_\_\_\_semester/year

\_\_\_\_\_ Consult with a counselor/advisor before withdrawing from a class

\_\_\_\_\_ Complete all courses with a grade of "C" or higher.

\_\_\_\_\_ Make a counseling appointment to create a Student Educational Plan

\_\_\_\_ Meet with Instructor(s) for:

\_\_\_\_ Meet with a Counselor/Advisor mid-semester to submit my progress report by \_\_\_\_\_

\_\_\_\_\_ Repeat the following courses(s): \_\_\_\_\_\_

Refer t	o: Tutoring	Study Hall 🗌	Financial Aid
EOPS/Cal Works	Disabled Studen	t Services	Admissions & Records 🗌

I understand that failure to meet the conditions set forth in this contract may lead to further blocking or registration, limits on credits that I may enroll in and/or Dismissal from Palo Verde College.

Not meeting requirements set forth above will result in violation of your contract and may result in the loss of priority registration and loss of the Promise Grant formerly known as BOG waiver (See new Promise Grant Regulations). For level 2 probation students this may result in dismissal from Palo Verde College.

Student Signature:	Date:
Counselor/Advisor Signature:	Date:

Note: \_\_\_\_\_