



## **ACADEMIC PROGRESS PLAN**

The purpose of this plan is to document the reasons and actions that you are going to undertake in order to improve academic performance.

If you are required to attend a Progress Review hearing, you should bring a copy of this plan to your hearing. You should sign the Plan to endorse your commitment to the proposed actions.

The Plan is valid from the date you signed it, until the last day of the Teaching Period, unless specified otherwise.

Student Name		ID Number					
Program Code		Program N	Program Name				Faculty
Year/Stage of Study			Is this your first Academic Progress Plan?		emic	Do you have an Academic Learning Plan?	
			YES	NO		YES	NO
Date of Pl	R Hearing (If	applicable)					
Part 1	What was the reason for your unsatisfactory academic performance? (Please tick)						
	Failing 50% or more of the total number of credit points of enrolled load in current and previous Progress Review Period (PRP)  Failing a unit of study (including a unit studied in Winter or Summer Term) for the third time						
	Failing to med	et conditions pre	viousl	y imposed by a PR	Panel		
Part 2	What were the reasons that impacted on the poor performance?						
Please give	e reasons: (eg	financial issues	(worki	ng too many paid h	ours) o	r relationship is	sues

Part 3	What strategies and actions do you intend to take to improve your performance?							
Strategy		Timeframe/By When						
Α								
В								
O								
D								
	List examples of any actions you have already taken (EG workshop attendance, medical evidence)?							
Part 4	Consider and indicate whether you intend using/attending any of the following:							
	Regular class attendance							
	Reduce paid working hours							
	et with Course Administrator to redo course plan							





	Meet with unit Convenor/Tutor to ask about things you don't understand												
	Review past assessments and note Convenor's comments   Convenor Name:												
	Other												
	(Specify)												
Part 5	Consider and indicate whether you intend using/attending any of the following:												
	Academic Language Learning (ALL) Centres www.international.swinburne.edu.au/las												
	Learning Links Study Support <a href="www.swinburne.edu.au/learninglinks">www.swinburne.edu.au/learninglinks</a> Maths and Stats Help Centre (MASH <a href="mash@swin.edu.au">mash@swin.edu.au</a> )												
								Programming Help Desk www.swinburne.edu.au/ict/students/helpdesk.htm					
	Health Service healthservice@swin.edu.au												
	Student Services Counselling (including Financial Counselling)												
	http://www.swinburne.edu.au/stuserv/counselling/index.html												
	International Student Advisor												
	http://www.international.swinburne.edu.au/contact/current-student-contacts/#Advisers												
	Swinburne Students Amenities Association http://www.myssaa.com.au/Advocacy												
	Academic Success Program (ASP) Workshops <a href="http://www.swinburne.edu.au/stuserv/counselling">http://www.swinburne.edu.au/stuserv/counselling</a> # Making the Most of Your Time # Make Stress Work for You												
							# Getting and Keeping Motivated						
								# Preparing for Exams					
		# All Day ASP Workshop											
		Disability Liaison Office <a href="http://www.swinburne.edu.au/stuserv/disability/">http://www.swinburne.edu.au/stuserv/disability/</a>											
Part 6	Student Commitment												
	I agree to undertake the conditions of this Academic Progress Plan which are designed to help me improve my academic performance.												
	I understand that this Plan may be taken into account if my academic performance is unsatisfactory in future.												
	I understand that the University may contact me to offer me further targeted support.												
	I agree to follow up the specific recommendations in my plan and to provide supporting evidence if required.												
	SignatureDate												