

EOPS ACADEMIC PROGRESS REPORT

Student Name: _____ **ID:** _____

INSTRUCTORS:

Please evaluate your student's progress according to the criteria below. We encourage your comments and thank you for your participation. If you have questions or comments, please contact Emily Stone, EOPS Director, at ext 2366 or 2236, or estone@dvc.edu.

EOPS STUDENT:

Please follow the steps below to complete your Progress Report:

1. *Between the 4th and 9th weeks of the semester*, meet with each of your instructors during office hours or another time outside of the class period. (*Note: it may be advisable to complete your progress report prior to the 4th week of the semester. In most courses, it is advisable to see your instructor after your first test or exam)*
2. *Request each instructor to evaluate your progress in the space provided. For your privacy, you may fold this form or pick up additional forms in the EOPS Office or download the form on the EOPS web-page, www.dvc.edu/eops/progress_report.htm.*
3. *When progress in each of your classes has been recorded on this form, bring the completed progress report form to your next EOPS counseling visit for review.*
4. *For online classes, ask your instructor to access an online version of the progress report at www.dvc.edu/eops/progress_report.htm or you may submit email correspondence from your instructor, and attach that correspondence to the progress report form.*
5. *For late-start classes, bring a separate progress report form to the late-start class instructor mid-way through the class term.*

If you have any questions about this process, please stop by the EOPS Office for assistance.

Course: _____ Current grade (if available): _____

	Attendance/ Timeliness	Participation	Assignments	Exams	Quality Of Work	Timeliness Of Work	Language Skills, Reading/Writing
Excellent							
Good							
Average							
Needs Improvement							

Support services recommended: ___ Tutoring ___ Counseling ___ Other: _____

Return to instructor for progress update on _____

Comments: _____

Instructor Signature: _____ Date: _____

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