

U-THRIVE ACADEMIC PLAN

Name: _____ Email: _____@umass.edu

SPIRE ID: _____ Primary Major: _____ Phone #: _____

I. Introduction: We want you to be successful and thrive at UMass. The *U-Thrive Academic Plan* helps students identify a path to academic and personal success. Through completing the form and having a discussion with your Student Success Advisor, you will have the opportunity to identify challenges that impact your success; reflect on your strengths and what has worked well in the past; and identify new goals. We recommend you start working on the form on your own and then work with your Student Success Advisor to finalize it.

Tracy Eason: taeason@umass.edu, 130 Arnold House

- Public Health and Nutrition majors
- SPHHS Exploratory Track (for students with last name starting with A-K)

Torin Moore: tymoore@umass.edu, 127 Arnold House

- Kinesiology, Communication Disorders majors, and
- SPHHS Exploratory Track (for students with last name starting with L-Z)

II. Action Plan- What does a successful semester look like to you?

Goals- Write three goals that you would like to accomplish this semester.

1. _____
2. _____
3. _____

Strengths- Describe any academic and personal successes over the past few months.

Academic Challenges- Describe factors affecting your academics e.g. difficulty managing time, disinterest in classes, unable to manage the high work load, teaching style does not align with learning style, unsure of how to study, etc.

Factors Outside the Classroom- Describe outside factors that are affecting your academic success e.g. financial difficulties, illness/health problems, family concerns, work, etc.

Resources- Indicate which people or resources on or off campus will provide you with support moving forward.

Actions- Describe what actions you will take to achieve your listed goals e.g. meeting with your advisor, utilizing LRC resources, attending faculty office hours, and focusing on personal well-being and development (e.g. CCPH, attending Success Toolkit Series, sleep/exercise).

1. _____

2. _____

3. _____

III. Course Plan for Next Semester: Students need to be enrolled in 12 credits to be considered a full-time student. It is recommended that students take 14-16 credits per semester to stay on track for graduation. Only courses with grade of C- or lower may be repeated.

Semester & Year: _____

Total Credits for the Semester: _____

Course Department and #	Title	# of Credits	Indicate if Course Satisfies Major Requirement, Gen Ed, or Other	Repeat? (Y/N)

IV. Agreement

I understand that if I follow this plan and achieve the stated academic goals, I will receive the support of my advisor for continuation at the School. The final decision on continuation will be made by my Academic Dean or the Committee on Admissions and Records. I also understand that I must report to my advisor any change in my transcript, schedule or personal circumstances that occur after the completion of this academic plan.

Student Signature

Date

Student Success Advisor Signature

Date