

## Student Advising Case Report

Case No.1     Case No.2     Case No.3     Case No.4     Case No.5

Student Information				
Student's Name:			Student's No.:	
Department:			Student's Level:	
Total Credit:			Student's GPA:	
Issues				
<b>Academic Issues:</b>				
<input type="checkbox"/> Registration	<input type="checkbox"/> Postpone Semester	<input type="checkbox"/> Withdrawal from Semester	<input type="checkbox"/> Re-Enrollment	
<input type="checkbox"/> Exam Absent	<input type="checkbox"/> Add/Drop Courses	<input type="checkbox"/> Withdrawal from Courses	<input type="checkbox"/> Transfer <input type="checkbox"/> Absent	
Others: .....				
<b>Academic Performance:</b>				
<input type="checkbox"/> GPA Range Less than 2	<input type="checkbox"/> GPA Range 2.00-2.25	<input type="checkbox"/> GPA Range 2.25-2.5	<input type="checkbox"/> GPA Range 2.5-2.75	
<b>Courses: (An academic problem in a course):</b>				
.....				
.....				
<input type="checkbox"/> Other	<input type="checkbox"/> Social Issues	<input type="checkbox"/> Financial Issues	<input type="checkbox"/> Health Issues	
Topics of discussion				
No.	Questions	Answer		
1	Do you have prior knowing about the problem?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
2	What are the reasons, from your point of view?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		-	-	
3	Do you have official documents proving this?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
		-	-	

4	Do you know how this problem affects your academic performance?	<b>Yes</b>	<b>No</b>
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**The Advisor can ask any questions related to the issue if needed.**

<b>Academic Advisor Comments :</b>	..... .....
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<b>Advisor Name:</b>	<b>Student Name:</b>
<b>Signature:</b>	<b>Signature:</b>
<b>Date :</b>	