



School of Nursing Academic Warning Communication Record

Student Name: Date:

Course Prefix, Number, & Title:

Faculty of Record:

Evidence to warrant concern related to course objectives:

Plan to address areas of concern (i.e. what the student is expected to do):

Faculty Role (i.e. what the faculty will do to facilitate achievement of the plan)

Timeline:

Consequences if no improvement:

Referrals & Options Discussed:

- Referred student to advisor, appropriate program director, or campus Associate Dean
- Referred student to the SON Catalog/ Student Handbook and/ or program guidelines
- Student will address areas of concern and continue in course.
- Student is to withdraw from the course. (Faculty to contact Registrar for appropriate procedure.)
- Student is to go on Leave of Absence or Withdrawal from SON. (Student completes OHSU Registrar LOA/ Withdrawal form.)

Faculty Signature & Date: _____ Student Signature & Date: _____

Optional Student Comment:

Copies to:

- Advisor
- Faculty of Record
- Program Manager
- Student & Student File
- Director of Academic Program/ Campus Associate Dean
- Senior Associate Dean of Program