

LOS MEDANOS COLLEGE

EOPS/CARE & CaWORK's

2700 Leland Road, Pittsburg, California 94565-5197 Tel.: (925) 473-7480

Academic Progress Report

Academic Term

Fall 2015 Deadline: **October 2, 2015 at 1:00pm**

@insite.4cd.edu

Student Name

Student ID#

Email Address

Faculty Member: We view the student-instructor partnership as one of the most vital factors of student success. **Students must meet with ALL instructors during office hours to obtain instructor feedback for enrolled classes.** In the space below, please comment on the student's involvement in your course, commenting on their -1) participation, 2) attendance, 3) understanding of course material and, where possible, 4) a grade. Instructor feedback enables EOPS to, not only promote academic networking between faculty and students, but also to monitor academic progress and provide timely support. **Students with on-line courses must attach an e-mail from their instructor(s).**

| Instructor's Signature | Course | Class Participation | Attendance | Demonstrates solid understanding of course material? | Did student meet you during your office hours? | Comment or Grade |
|------------------------|--------|--|--|--|---|------------------|
| | | <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor | <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor | <input type="checkbox"/> Yes <input type="checkbox"/> Somewhat <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| | | <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor | <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor | <input type="checkbox"/> Yes <input type="checkbox"/> Somewhat <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| | | <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor | <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor | <input type="checkbox"/> Yes <input type="checkbox"/> Somewhat <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| | | <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor | <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor | <input type="checkbox"/> Yes <input type="checkbox"/> Somewhat <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |
| | | <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor | <input type="checkbox"/> Good <input type="checkbox"/> Average <input type="checkbox"/> Poor | <input type="checkbox"/> Yes <input type="checkbox"/> Somewhat <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Applicable | |

For Office Use Only

Distribution: EOPS CaWORKs

Coded on DB by: _____ Date Coded: _____

Program Action: Schedule Counseling Contact

Instructor Comment: _____
