

**TERM ACADEMIC PERFORMANCE EVALUATION**

NAME: \_\_\_\_\_ CLASS \_\_\_\_\_ TERM(S/Q) YEAR: \_\_\_\_\_

<u>Student's Course Schedule</u>			<u>End-Term (S/Q) Grades/GPA</u>
<u>Course#</u>	<u>Hrs</u>	<u>Grade Goal</u>	<u>(Completed by Instructor)</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Student Term (S/Q) GPA Goal: \_\_\_\_\_ Term (S/Q) GPA Achieved: \_\_\_\_\_  
Students Estimated Time Allocations (Hours):  
    Extracurricular Activities: \_\_\_\_\_ Study: \_\_\_\_\_ Work: \_\_\_\_\_

**Student's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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**ADVISOR'S INITIAL INTERVIEW**

OPMIS Comprehensive Student Info Summary reviewed: \_\_\_\_\_  
NROTC Program Requirements Checklist discussed: \_\_\_\_\_  
Student Degree Program reviewed/updated: \_\_\_\_\_  
Student's anticipated graduation date: \_\_\_\_\_  
Review of previous academic performance completed: \_\_\_\_\_  
Academic goals discussed: \_\_\_\_\_  
Review of Aptitude Evaluation and Class Standing completed: \_\_\_\_\_  
Academic goals discussed: \_\_\_\_\_  
Review of Aptitude Evaluation and Class standing completed: \_\_\_\_\_

**Advisor's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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**END OF TERM ADVISOR'S ACADEMIC EVALUATION (Enter grades/GPA above)**

NROTC Program Requirements completed: \_\_\_\_\_  
Student's Academic Performance: Excellent =\_\_ Satisfactory \_\_\_\_ Deficient: \_\_\_\_  
Student is/is not working at level commensurate with ability.  
Student will/will not complete requirements for commissioning on schedule.  
Instructor comments and recommendations:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Advisor's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_