

For Office Use Only
Date Received:/
Received By:
Quarter Code:

EDMONDS COMMUNITY COLLEGE ACADEMIC SUCCESS PLAN

Fill-in legibly by printing or using black ink

Name (first, last)	Student	ID number	
EdMail address (email address) *Req	uired* Seconda	ry email address	
Phone Number			
You have been placed on Academic Facademic quarter. You may appeal y submitting or mailing it to the Advisi Academic Success Plan early to allow	our blocked registration ng Resource Center on t	n by completing this he first floor of Lyni	Academic Success Plan and
You will be notified of a decision by If your plan is approved, the If your plan is denied, you wi the plan.	block on your registration	on will be removed.	
 If your plan is approved, the If your plan is denied, you wi the plan. 	block on your registration	on will be removed. eer and Academic A 25.640.1458	dvisor, who will assist you with www.edcc.edu/advising
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➤ If your plan is approved, the ➤ If your plan is denied, you wi the plan. Advising Resource Center Edmonds Community College PART 1 – EDUCATIONAL GOALS While here at Edmonds Community	block on your registration of the contacted by a Car set of the co	on will be removed. eer and Academic A 25.640.1458 et, Lynnwood, WA 9 are you studying? Certificate: _	dvisor, who will assist you with www.edcc.edu/advising

For the following sections, you may attach additional sheets if needed.

•	orief explanation as to why you were unable to maintain Satisfactory Academic Progress. Camples of challenges you faced or barriers that prevented your success.
·	
PART 3 – CORREC	
	 corrective action you have taken to assure Satisfactory Academic Progress in the currer quarter(s). Please provide examples about how you plan to be successful and overcome
	iers that may still be present.
	
Total Authoria	DO NOT WRITE BELOW THIS LINE
vising Actions	
ın Denied: 🗌	Student notified:/
n Approved:/_	/ Unusual Action screen updated (use code AP): Follow-up email sent:
ministrative Action	
	ns: ent:/ Plan assigned to: