



Department of Nursing and Rehabilitation Sciences
Student Non-Progression in Nursing Courses

Student Name: _____ CID: _____ Course Attempted: _____

Semester/Yr: _____ Instructor: _____ Team Leader: _____

Student Level in Program: _____ Final Course Grade: _____

Reason for Non-progression (check all that apply)

Received grade less than C: [] Y [] N

Withdrew before 12th day: [] Y [] N after 12th class day: [] Y [] N If yes, date of withdrawal _____

Faculty contact: [] Y [] N Reason for withdrawal (please specify) _____

Student Rating Scale: 1 = Very good 2 = Good 3 = Poor 4 = Very poor

Course Performance: Online Classes:

- Discussion
o # Absences _____ # Late posts _____
o Quality of participation [] 1 [] 2 [] 3 [] 4 [] NA
Exam/Quiz Grades _____
Group, Assignment, or Project Grades _____
Other Grades _____
Other Issues _____

Comments:

Large empty rectangular box for student comments.

Student Rating Scale: 1 = Very good 2 = Good 3 = Poor 4 = Very poor

Course Performance: Classroom & Lab Courses:

- Lecture
 - # Absences _____ # Tardies _____
 - Quality of participation 1 2 3 4 NA
- Exam/Quiz Grades _____
- Group, Assignment, or Project Grades _____
- Other Grades _____
- Other Issues _____

Comments:

Student Rating Scale: 1 = Very good 2 = Good 3 = Poor 4 = Very poor

Clinical Courses:

- Attendance
 - # Absences _____ # Tardies _____
- Clinical Performance: Satisfactory Unsatisfactory Unsafe
- Quality of clinical preparation: 1 2 3 4 NA
- Quality of clinical assignments/papers: 1 2 3 4 NA

Comments:

Recommended for readmission? Yes No

Comments:

Faculty Signature _____

Date _____

Team Leader Signature (if applicable) _____

Date _____