



ANGELO STATE UNIVERSITY

Department of Nursing

EXAM COUNSELING FORM

Student: _____ Date: _____

Course Number: _____ Exam#: _____

Exam Grade: _____

Your performance on this exam places you at risk for not passing this course. Successful completion of each nursing course with a grade of “C” or better is required for continuation in the Nursing Program (Angelo State University Undergraduate Catalog).

Factors Contributing to my performance on this exam:

Plan for Improvement:

Student Signature: _____

Date: _____

Instructor Signature: _____

Date: _____

ASU Station #10902 | San Angelo, Texas 76909-0902

Phone: (325) 942-2224 | Fax: (325) 942-2236 | www.angelo.edu/dept/nursing

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