## Student Success Plan – Contract In support of Undergraduate Permission for Exception to AP.1.3.4 (Repeating a Course)

Student's Name:				G#:	
	Last	First		_	
Mason Email Address:			Major(s):		
Semester/Year Reque	sted:				
request an appointme	and 302: students should e ent (cwooten3). Mason Kor Coordinator Alice Wriggle	rea students with ÉNGH	100, 101, 302 re	quests should	
	ess, CEC, FAVS, Music, an licy – the unit offering the c				
	Previous Exper	ience with Course See	king to Repeat		
Course Subject & Number	Course Tit	tle	Semester	Year	Grade
circumstances beyond	mation about your circums d your control, please provi ations from Office of Disab	ide documentation of the	ese issues (e.g., r	nedical records	
approvou accomme	and the morn of mod of Broad	mily convices, or care o	madilida di yadi d		
Develop an action pla improve the likelihood	n to address the issues aff of successfully completing	ecting your performance g the course, if your req	e. Be specific. Wh uest is approved	at strategies yo ? What will you	ou will use to
	least three action steps.			•	
Maior Advisor Cimat				Dete	
Major Advisor Signat		_	_	Date	
Course department of	check appropriate box and	sign below: Approve [	Deny		
Print Name	it Name Signature		Date		

11/2024

Students: Please submit this completed form to your advisor Advisors: Please forward this request to your academic dean's office for review.