Student Success Self-Assessment

Please complete this self-assessment and bring it with you to your advisement appointment. This information will be used to assess your needs as a probationary student and will remain confidential.

Name ____________________________________________ Date ____________________________

CSUN Student ID ____________________________ CSUN GPA ___________ Total GPA ___________

Phone (______) _______ - ___________________________ Major ________________________________

Career Goal ____________________________________________________________________________

Check ALL of the following factors you believe contributed to your current probation status:

☐ Feeling Overwhelmed ☐ Alcohol or Drug Use ☐ Over Involvement in Activities
☐ Unsure of Major ☐ Illness or Injury ☐ Social Commitments
☐ Stress/Anxiety Management ☐ Personal Relationship(s) ☐ Feeling Lonely
☐ Procrastination ☐ Didn’t Attend Class ☐ Roommate/Housing Problems
☐ Family Issues or Obligations ☐ Time Management ☐ Financial Challenges
☐ Math Skills ☐ Full or Part-time Job ☐ Course Load/Took Too Many Units
☐ Learning Difficulties ☐ Homesickness ☐ Lack of Interest/Motivation
☐ Test Taking/Anxiety ☐ Boredom ☐ Reading or Writing Skills
☐ Study Habits ☐ English Language Skills
☐ Other (specify): ______________________________________________________________________

How many hours per week were you working last semester? ____________ This semester? __________

In school previously:

The subject(s)/class(es) you liked the best: ________________________________________________

The subject(s)/class(es) you liked the least: ________________________________________________

Is there anything else you would like to share with your advisor?

How do you plan to get yourself back in good academic standing at CSUN?
Student Success Self-Assessment (Cont’d)

Name ____________________________________  CSUN Student ID ___________________________________

This side to be completed with advisor during advisement appointment:

Follow-Up/Recommendations:

__________________________________________________________________________________________
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Notes:

- Waitlisting begins on your registration date.
- Enrollment in repeated courses begins ________________.

By signing below, I understand my advisor’s recommendations and acknowledge that I have received the Student Success Information sheet.

Student’s Signature: ___________________________  Date: ___________________________

Advisor Name: ________________________________  Advisor Email: ___________________________ @csun.edu

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