

Pacific University - School of Occupational Therapy
ACADEMIC STANDING SUMMARY MEMO

Student: _____ **Advisor:** _____

Date: _____ [] **Fall/Yr** _____ [] **Spr/Yr** _____

[] **MOT1** [] **MOT2** [] **MOT3**

Focus of Advising Session: Review of overall academic standing including: academic performance and progress, practice skills, compliance with school rules and procedures, professional competence, interpersonal and professional relations, and professional/ethical conduct and attitudes.

Documentation Responsibilities:

TB test	[] current	[] needs to be updated
CPR	[] current	[] needs to be updated
First Aid	[] current	[] needs to be updated
Immunizations _____	[] current	[] needs to be updated

Status of Criminal Background Check: _____

Academic Standing and Progress:

1. Academic performance is: [] Acceptable
(*Grade point average*) [] At risk
[] Not Acceptable

Grade point average of previous semester: _____
Cumulative OT grade point average: _____

2. Development of practice skills is: [] Acceptable
(*Knowledge, Critical reasoning, technical skills*) [] At risk
[] Not Acceptable

3. Compliance with school rules or procedures is: [] Acceptable
[] At risk
[] Not Acceptable

4. Professional/ethical conduct and attitudes are: [] Acceptable
[] At risk
[] Not Acceptable

5. Interpersonal and professional relations are: [] Acceptable
(*therapeutic rapport, community/peer/faculty/staff interaction*) [] At risk
[] Not Acceptable

Self-Assessment Sheet Completed: [] Yes [] No

Comments/Recommendations:

(For any performance area rated “at risk” or “not acceptable”, the advisor must provide evidence and recommendations. The student must address these areas in their semester goals and action plan.)

Advisor: _____
Date

By signing, I acknowledge that I have read and understand the information in this document.

Student _____
Signature Date