

Pacific University - School of Occupational Therapy
ACADEMIC NOTIFICATION
“OF CONCERN”

Date: _____ [] Fall [] Spr Year _____

Student: _____ [] MOT1 [] MOT2 [] MOT3

Faculty: _____

It has been observed that one or more of the following academic standing variables (as indicated) is/are of concern. The student is responsible to take action to remediate the issue(s) of concern. Failure to do so may result in a change in academic standing (i.e. warning or probation).

- Academic Performance (*GPA, course grades or assignment grades*)
- Development of practice skills (*Knowledge, Critical reasoning, technical skills*)
- Compliance with school rules or procedures
- Professional/ethical conduct and attitudes
- Interpersonal and professional relations (*therapeutic rapport, community/peer/faculty/staff interaction*)

Description of Issue of Concern:

Faculty Signature: _____
Place original in student file. Provide one copy to the academic standing coordinator.

Student Signature: _____ **Date:** _____
Signature indicates that you received a copy of this form.