

Center for Academic Advising & Retention (CAAR)
Academic Pathways Program (APP): Student Contract

STUDENT INFORMATION:

Name: _____ ID Number: _____

Cell Phone: _____ Email: _____

1. I am required to sign this *Student Contract* and abide by its conditions.
2. I am expected to attend at least 90% of my classes (see chart below).

If your class meets...	Then, you are permitted...
1 day/week	1 absence/semester
2 days/week	2 absences/semester
3 days/week	4 absences/semester
4 days/week	5 absences/semester

- a. I understand that I may be excused for legitimate absences, such as medical reasons, significant personal or family crisis, or required legal obligations. Should you need to be excused from class for any of these reasons, please contact Crystal Miller in the Office of Student Affairs at cemiller@frostburg.edu.
 - b. I understand that no absence will be excused unless I provide documentation which verifies the validity of the situation.
 - c. I understand that this agreement is separate from any attendance policy which an individual professor may have for one of their courses. If a professor has an attendance policy that allows for fewer absences than the above agreement, I will abide by that policy. If a professor allows for a larger number of absences, or there is no required attendance, I understand that I must abide by the attendance agreement above.
3. I am required to attend regular, bi-weekly meetings throughout the entire semester with my University Advisor.
 4. I am required to complete a minimum of five (5) study hours in the Lewis J. Ort Library, Math Assistance Lab, and/or TRIO Student Support Services office per week.
 - a. I understand that CAAR and TRIO staff are able to track sign-ins for study hall.
 - b. I understand that it is academically dishonest to leave the building when I am signed in for study hall hours.
 5. I am strongly encouraged to utilize the Tutoring Center regularly, especially if I receive any midterm warnings.

6. I am required to meet with at least one instructor during office hours by week five (5) of classes. I am strongly encouraged to meet with instructors for any class in which I receive a midterm warning or an academic alert.

7. I understand that it is crucial for me to have an understanding of my financial aid status, and I am encouraged to contact the Financial Aid Office to discuss the policies for *Satisfactory Academic Progress* and financial aid eligibility.

8. I am required to meet the *Student Code of Conduct* and the *Guidelines on Academic Integrity*.

9. I agree that the CAAR staff may share this contract with any of my professors, advisors, the Office of the Provost, and members of the Academic Success Network so that they are aware of my obligations to this program.

I understand that:

- A. I may be removed from the APP program if I fail to adhere to any one of the conditions above;
- B. I understand that if I am removed from the APP program, the Office of the Provost will be informed, and we will not support a dismissal appeal.

Academic Dismissal

You will be dismissed for unsatisfactory scholarship if **any one** of the following conditions applies:

1. Your earned cumulative grade point average is 0.0.
2. You fail at least half of the semester hours of credit in any single semester while on academic probation.
3. You fail to meet the minimum academic progress standard for your number of earned hours while on academic probation.
4. You remain on academic probation for three successive semesters without achieving a cumulative GPA of at least 2.0. **Any enrollment in a summer session counts as one semester on probation.**

Dismissal Conditions

1. You will not be allowed to enroll at Frostburg State University for at least two semesters. The summer sessions are considered the equivalent of one semester.
2. After the minimum two-semester dismissal period, you are eligible to apply for readmission through the Admissions Office. Readmission is not guaranteed. (*See the section on readmission in the admissions section of the catalog.*)

I have read this agreement and understand the potential sanctions if I do not abide by it. I have had the opportunity to ask questions about this contract and discuss it with my University Advisor. I understand and agree to each of the terms and conditions as stated above.

Signature

Date