TLC Retention Office Academic Alert Form

Student Name: ___________________________ Student ID: A____________________
Phone:_____________________________

Referred by:______________________________________________ Please Check one of the following:

☐ Faculty  ☐ Staff  ☐ Administration  ☐ Peer Mentor  ☐ Parent

☐ Excessive Absences/Tardy #_______________  ☐ Class average below a C
☐ Failure to complete homework  ☐ Concerns over basic skills
☐ Low Test/Quiz/Assignment Scores_____________  ☐ At-risk of dropping class
☐ Overall GPA < 2.0  ☐ Risk of Probation/Suspension

Urgency/Risk:

☐ Mild  ☐ Moderate  ☐ Severe  ☐ Imminent

Comments/Interventions tried to date with student:

Action Taken( TLC USE ONLY):