

EOPS-EXTENDED OPPORTUNITY PROGRAMS AND SERVICES
Glendale Community College
ACADEMIC WORK-IN PROGRESS REPORT

 LAST NAME

 FIRST NAME

 GCC ID#

FALL _____
 WINTER _____
 SPRING _____
 SUMMER _____

 DUE DATE

Dear Faculty Member:

The student above have been identified as EOPS eligible and currently enrolled in your class. Please assist us in completing this form for the student by noting their level of progress in your course. Your comments will help EOPS take appropriate action to provide the necessary support for her/his academic success.

STUDENT'S PRESENT STANDING

CODES

1. Excellent
2. Above Average
3. Average
4. Below Average
5. Failing

SUB CODES

- | | |
|-------------------------------|---------------------------------------------------|
| A. Homework not completed | F. Performance or Exam(s) |
| B. Recommend tutoring | G. Attending regularly/no grade yet |
| C. Irregular class attendance | H. Needs counseling |
| D. Preparation of assignments | I. Missing Assignments |
| E. Assignment not completed | J. Other (Please comment in the comments section) |

Course Title/Section #	Units	Instructor's Signature	Codes	Sub Codes	Instructor's Comments

Student's Signature _____

EOPS Counselor _____

Date _____

Phone Extension _____