Organization: ___________________________ Member Name: ________________________________

The information requested on the Academic Progress Report will be utilized to provide educational support to Greek organization members at Rhode Island College. The Student Activities Office’s effort to provide the best possible academic support services to Greek members is dependent on the information you provide on classroom performance. Even more important to this effort are any suggestions you have that could lead to improved performance to this student. Your support is greatly appreciated.

Section Below to be filled out by Professor:

Course: ___________________________________________ Professor: __________________________

(Subject & Section)

Approximate Class Grade: _____ A _____ B _____ C _____ D _____ F

Number of Tests: _____________________________ Number of Classes: ___________________________

Assignments completed and passed in on time:

_____ Always     _____ Mostly     _____ Seldom     _____ Never

Number of Assignments not handed in: ________

Suggestions for improvement: ______________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

____________________________________________________________________________________

Professor’s Signature ___________________________ Date ___________________________

Thank you for your assistance. If you have any questions, feel free to contact me at x2706 or mgiacalone@ric.edu.

Michael Giacalone, Student Activities Program Coordinator