

Student Success Plan

Short Term Goal: _____
(Within semester)

Long Term Goal: _____
(Within 2yrs.)

In order to help me graduate from STC, I agree to seek assistance in the following areas:

Support Areas

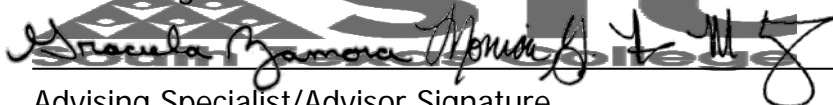
(Circle all that apply)

- | | |
|--------------------------------|--|
| Academic Advising | Financial Aid |
| Counseling Services | Enrichment Workshops |
| Center for Learning Excellence | Faculty Assistance |
| Computer Lab | Student Assessment Center |
| Career Center/ Job Placement | Student Activities (<i>Student organization</i>) |
| P.A.S.S. Program | ADA |

I agree to work toward meeting the goal(s) listed above which will give me the greatest opportunity for success at STC. I will meet this goal by doing the following:

- _____
- _____
- _____
- _____

Student Signature



Advising Specialist/Advisor Signature

Date

Date



STATEMENT OF EQUAL OPPORTUNITY. No person shall be excluded from participation in, denied the benefits of, or subject to discrimination under any program or activity sponsored or conducted by South Texas College on the basis of race, color, national origin, religion, sex, age, veteran status, or disability. Individuals with disabilities requiring assistance to receive these services should contact disAbility Support Services at 872-2513.

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