



OTTERBEIN UNIVERSITY

Graduate Assistant Academic Progress Review Form

Name: _____

Position: 10 months _____

12 months _____

12 months with working breaks _____

Department: _____

Program/Degree: _____

Semester/Year: _____

GPA Semester: _____ GPA Cumulative: _____

Credit hours completed this semester: _____

Making Progress towards Degree: yes _____ no _____ (GA students must take 18 semester hours/academic year) Comments: _____

Will Graduate Assistant return next semester: yes ___ no ___

Coach/Supervisor Name: _____

Coach/Supervisor Signature: _____ Date: _____

Phone Extension: _____

(To be completed by the direct supervisor after each semester of study and sent to the Assistant of The Graduate School)