# GRADE IMPROVEMENT *plan*

STUDENT NAME

GRADE LEVEL

DATE

i Check every box that fits you. Be honest — this plan is about progress, not perfection. Then turn the page to set your goals.

## 1 Challenges Affecting My School Success

Check all that apply

- ☐ Lack of motivation / energy / don't care
- ☐ Lack of interest in schoolwork
- ☐ Incomplete homework
- ☐ Poor quiz / test scores
- ☐ Attendance issues
- ☐ Mental health concerns
- ☐ Family issues
- ☐ Peer issues
- ☐ Drugs or alcohol use
- ☐ Other:

## 2 My Strengths

- ☐ Leadership
- ☐ Creativity
- ☐ Discipline
- ☐ Critical thinking
- ☐ Motivation
- ☐ Persistence
- ☐ Organization
- ☐ Self-advocacy
- ☐ Other:

## 3 My Supports

Who can help me?

- ☐ Family
- ☐ Counselor
- ☐ Friends
- ☐ Coach / Mentor
- ☐ Teachers
- ☐ Therapist
- ☐ Other:

## 4 Action Steps for Success

Pick the steps you will commit to

- ☐ Meet with teacher regularly
- ☐ Check Canvas / Skyward daily for assignments, or use a planner
- ☐ Attend all classes on time
- ☐ Create a positive homework / study environment
- ☐ Turn in assignments on time
- ☐ Ask questions in class
- ☐ Set aside daily study time
- ☐ Set weekly goals
- ☐ Work with a tutor when needed
- ☐ Other:

# ACADEMIC TRACKING

For each class, write where you are now, where you want to be, and the exact steps you will take to get there.

**STUDENT NAME**

| Class | Current Grade | Goal Grade | To-do What will I do to reach my goal? |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

## Notes