

## Student Success Self-Assessment

**Please complete this self-assessment and bring it with you to your advisement appointment.** This information will be used to assess your needs as a probationary student and will remain confidential.

Name \_\_\_\_\_ Date \_\_\_\_\_  
CSUN Student ID \_\_\_\_\_ CSUN GPA \_\_\_\_\_ Total GPA \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Major \_\_\_\_\_  
Career Goal \_\_\_\_\_

**Check ALL of the following factors you believe contributed to your current probation status:**

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Feeling Overwhelmed          | <input type="checkbox"/> Alcohol or Drug Use      | <input type="checkbox"/> Over Involvement in Activities  |
| <input type="checkbox"/> Unsure of Major              | <input type="checkbox"/> Illness or Injury        | <input type="checkbox"/> Social Commitments              |
| <input type="checkbox"/> Stress/Anxiety Management    | <input type="checkbox"/> Personal Relationship(s) | <input type="checkbox"/> Feeling Lonely                  |
| <input type="checkbox"/> Procrastination              | <input type="checkbox"/> Didn't Attend Class      | <input type="checkbox"/> Roommate/Housing Problems       |
| <input type="checkbox"/> Family Issues or Obligations | <input type="checkbox"/> Time Management          | <input type="checkbox"/> Financial Challenges            |
| <input type="checkbox"/> Math Skills                  | <input type="checkbox"/> Full or Part-time Job    | <input type="checkbox"/> Course Load/Took Too Many Units |
| <input type="checkbox"/> Learning Difficulties        | <input type="checkbox"/> Homesickness             | <input type="checkbox"/> Lack of Interest/Motivation     |
| <input type="checkbox"/> Test Taking/Anxiety          | <input type="checkbox"/> Boredom                  | <input type="checkbox"/> Reading or Writing Skills       |
| <input type="checkbox"/> Study Habits                 | <input type="checkbox"/> English Language Skills  |  |
| <input type="checkbox"/> Other (specify):             |   |  |

How many hours per week were you working last semester? \_\_\_\_\_ this semester? \_\_\_\_\_

**In school previously:**

The subject(s)/class(es) you liked the best: \_\_\_\_\_

The subject(s)/class(es) you liked the least: \_\_\_\_\_

**Is there anything else you would like to share with your advisor?**

**How do you plan to get yourself back in good academic standing at CSUN?**

# Student Success Self-Assessment (Cont'd)

Name \_\_\_\_\_ CSUN ID \_\_\_\_\_

This side to be completed with advisor during advisement appointment:

**Follow-Up/Recommendations:**

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<b>Current Semester Courses</b>	<b>Next Semester Courses</b>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

\_\_\_\_\_ I have received the Student Success Information Sheet. It is my responsibility to read and understand the information provided.

Student's Signature \_\_\_\_\_

Date \_\_\_\_\_

Advisor Name \_\_\_\_\_

Advisor Email \_\_\_\_\_