

# SUNY CANTON GATEWAY TO SUCCESS PROGRAM

## ACADEMIC SUCCESS PLAN

Name:

Date:

College ID:

Student Email:

Intended Major:

Student Phone:

### PART 1: REFLECTION

**MOTIVATION FOR COLLEGE:** Why is it important for you to attend college? What would it mean to you to get a college degree? What are the goals you have that require a college education? How would you feel if you did not succeed at SUNY Canton?

Type details here

**STRENGTHS** What do you feel are 3 strengths that you can use to help you achieve college success?

Type details here

**CHALLENGES:** Identify challenges or concerns you might have that may be or become barriers for success. Check all that apply

<input type="checkbox"/>	Undecided about major	<input type="checkbox"/>	Feel courses will be too challenging
<input type="checkbox"/>	Lack of goals	<input type="checkbox"/>	Difficulty focusing on needed tasks
<input type="checkbox"/>	Poor study skills	<input type="checkbox"/>	Not organized
<input type="checkbox"/>	Poor time management skills	<input type="checkbox"/>	Too much social life
<input type="checkbox"/>	Test taking or test anxiety	<input type="checkbox"/>	Financial concerns
<input type="checkbox"/>	Low motivation	<input type="checkbox"/>	Family concerns
<input type="checkbox"/>	Not committed to academic success	<input type="checkbox"/>	Health concerns
<input type="checkbox"/>	Outside work hours	<input type="checkbox"/>	Different priorities

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**PART 2: ACTION PLAN**

**SUCCESS HABITS:** List and describe five habits you believe will be important for success in college and that you will make every effort to develop and maintain throughout your college journey.

1.

2.

3

4.

5.

**COLLEGE RESOURCES** What college resources are you aware of and which do you think you will most need to utilize to be successful?

Type details here

**QUESTIONS:** What are some initial questions you have regarding college in general, SUNY Canton, the Gateway to Success Program, and/or how to achieve academic success.

Type details here

Is there any additional information you would like to share that would help us provide useful guidance, resources, or assistance?

Please be sure to meet with your Gateway to Success Mentor, complete and discuss this Academic Success Plan. **Planning is the first step toward ACHIEVING!** Please save a copy of this plan for yourself and turn on into your mentor so that you can refer back to it when you have your meetings every other week.

**This Academic Success Plan is REQUIRED and you must complete it and turn it in by September 9<sup>th</sup>, 2016.**

