

Osprey Success Plan

STOCKTON UNIVERSITY

# Osprey Success Plan

Name:	Z#:	Date:	
Previous semester GPA:			
What were your challenges from the past semester?			
What did you do well last semester?			
What is your plan to improve your grades?			

### **Co,..curricular Activities, Employment, & Time Management**

Employment	Location (on campus/off campus)	Hours Spent

#### **Weekly Study Schedule**



#### Student Involvement Plan

What do you do in your free time?

What opportunities were you looking for in college?

When was the last time you were really excited about something? What was it?

If you were going to create a new special interest club or group on campus, what would it be? Why?

#### Stockton Resources-\*\* Paths to Involvement

- Office of Student Development check list of all student groups on campus; Campus Center Suite 240 or call (609) 652-4205
- Athletics-(Intramurals/Club Sports), Ii6

#### **Academic Goal Setting**

I will set a <b>realistic</b> , desired grade for each class as a goal to achieve a semester GPA of	will set a realistic	. desired grade for	each class as a goal to	achieve a semester GPA of	
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Course to 70T015Mc 0T40128887TAM28