

STUDENT ATTENDANCE/ASSIGNMENT CONTRACT INSTRUCTIONS

THE PURPOSE: To facilitate an action by the instructor that can lead to student success. The Student Attendance/Assignment contract is an agreement between the student and the instructor that defines the requirements for the student to get back into good academic standing. *The Student Attendance/Assignment contract needs to be the first action taken by the instructor to ensure student success.*

THE GOAL: To assist the student in recognizing there is an attendance and/or assignment problem and to know the expectations and requirements to complete the class successfully.

INSTRUCTIONS:

1. At the top of the Early Alert referral form, click on the link to the Student Attendance/Assignment Contract.
2. Download the form into a word document.
3. Complete the form and save.
4. Print the form to discuss with and obtain the signature of the student.
5. Make sure a copy is given to the student.

EARLY ALERT REFERRAL FORM INSTRUCTIONS

THE PURPOSE: To obtain assistance from a counselor to facilitate an action that can lead to student success. The Early Alert Referral is a request for counseling services for a student, initiated by an instructor or advisor who needs assistance in working with a student.

THE GOAL: To assist the student in resolving serious problems that may prevent student success.

INSTRUCTIONS: If applicable, complete the Student Attendance/Assignment Contract first.

1. Complete all sections of the Early Alert. Check as many problem areas in the checklist that apply to the student's situation.
2. Give specific information on prior intervention actions you have taken with the student. (For example, Attendance/Assignment contract, individual discussions with student, phone calls, emails, etc.)
3. Provide additional comments deemed necessary for a counselor to provide effective intervention.
4. Once the form has been completed, click on the "Submit" button to send to dailey.b@ptc.edu.
5. Once a Student Success Center counselor has contacted or attempted to contact the student, a response will be sent to the instructor or advisor concerning the intervention steps.



EARS - Referral Form

[Click here for Instructions on both the EA and Attendance Contract.](#)

[Click here for Student Attendance/Assignment Contract.](#)

- ☐ Instructor will Handle
☒ Needs Counselor Intervention

FACULTY/STAFF INFORMATION

Instructor Name		Course (e.g. MAT 110)	
Instructor E-mail	Department Select Department ▼	Instructor Phone	

STUDENT INFORMATION

Student Name	Student PTC ID	Student Phone
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REFERRAL INFORMATION

<u>Academic Problem-Foundational</u>	<u>Academic Problem – Course Specific</u>	<u>Disruptive Student</u>
<input type="checkbox"/> Reading <input type="checkbox"/> Math <input type="checkbox"/> Writing <input type="checkbox"/> Note-taking <input type="checkbox"/> Test-taking <input type="checkbox"/> Study Strategies <input type="checkbox"/> Lack of critical thinking/reasoning skills <input type="checkbox"/> Other (Specify below)	<input type="checkbox"/> Lacks required materials <input type="checkbox"/> Did not pass first test <input type="checkbox"/> Does not turn in regular assignments <input type="checkbox"/> Difficulty understanding content <input type="checkbox"/> Low grades <input type="checkbox"/> Does not participate <input type="checkbox"/> Other (Specify below)	<input type="checkbox"/> Overt hostility, defiance, insults <input type="checkbox"/> Loud, erratic behavior <input type="checkbox"/> Physical Intimidation <input type="checkbox"/> Excessive demands for attention <input type="checkbox"/> Aggressive in class <input type="checkbox"/> Leaves class early <input type="checkbox"/> Academic dishonesty <input type="checkbox"/> Inappropriate cell use <input type="checkbox"/> Inappropriate computer use <input type="checkbox"/> Other (Specify below)
<u>Attendance Contract Issues</u>	<u>Personal Issues</u>	<u>Other Issues</u>
<input type="checkbox"/> Sleeps in class <input type="checkbox"/> Consistently late for class/leaves early <input type="checkbox"/> Excessive absences <input type="checkbox"/> No longer attending class <input type="checkbox"/> Other (Specify below)	<input type="checkbox"/> Change in demeanor <input type="checkbox"/> Lack of self-confidence <input type="checkbox"/> Depression <input type="checkbox"/> Other (Specify below)	<input type="checkbox"/> Transportation <input type="checkbox"/> Child Care <input type="checkbox"/> Housing <input type="checkbox"/> Illness <input type="checkbox"/> Family crisis <input type="checkbox"/> Personal crisis <input type="checkbox"/> Work conflicts <input type="checkbox"/> Financial <input type="checkbox"/> Other (Specify below)

Describe prior intervention action(s) you have taken with the student. Please be specific.

Additional Comments:

By clicking the "Submit" button below, I indicate that I give permission for the recipient(s) of this form to discuss comments with the student.



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Student Attendance and/or Assignment Contract

STUDENT INFORMATION		
Name:	PTC ID#	Date:
E-mail:	Phone #	
COURSE INFORMATION		
Curriculum	Course/Section #	Time/Place class meets
Describe the problem:		
INSTRUCTOR/STUDENT CONTACT		
Date of initial conference/telephone contact with student to discuss problem and determine a plan of action:		
Instructor's results/explanation of conference/telephone contact with student:		

Options:

- ☐ A. Attendance Contract (see below)
- ☐ B. Links to online resources
- ☐ C. Other (explain) _____

ATTENDANCE AND/OR ASSIGNMENT CONTRACT: The student must complete the following requirements to avoid withdrawal from class and to return to good academic standing.
(Be specific)

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Instructor Signature & Date

Student Signature & Date