



Whole Person Assessment
Plan for Improvement

Name: _____ Z Number: _____

E-Mail Address: _____ Cell Phone: _____

Major: _____ Academic Advisor: _____

Current WPA Score: _____ Goal WPA Score: _____

Current GPA: _____ Goal GPA: _____

Please summarize your plan for improvement: _____

In the space below (and on an additional sheet as needed), list the obstacles that have prevented you from attaining your goals for WPA and/or GPA, as well as the specific steps you will take to eliminate those obstacles. For example,

Obstacle #1: "I work 30 hours per week."

Plan: "I have spoken to my supervisor and am eliminating two shifts, which will reduce my hours to a more manageable workload. In the time freed up by not working those two shifts from 7:00 pm – 11: 00 pm Tuesday and Thursday, I plan to study in my room or the library."

Obstacle #1: _____

Plan: _____

Obstacle #2: _____

Plan: _____

