Academic Support Center
Striving Toward Academic Recovery (STAR) Program
Returning Student Intake Packet

Please complete as much of this packet as you can prior to your intake appointment. One of our counselors will help you with any areas where you need assistance.

Section 1: Student Information

Name ________________________________  Banner ID ____________________
Bravemail Address ____________________  Cell Phone __________________
What is your preferred method of contact? ☐ Email  ☐ Phone  ☐ Text Message

Major(s) ______________________________  Minor(s) ____________________
Who is your academic advisor? __________________________________________

Previous Semester (Term) GPA ___________  Cumulative GPA _____________
Student Status ☐ Freshman  ☐ Sophomore  ☐ Junior  ☐ Senior  ☐ Other _______

Which of the following campus resources have you used to help you be a successful student? Please select all that apply.

☐ Academic Advisor  ☐ Academic Support Center
☐ Advising Center  ☐ STAR Program
☐ Professor/Instructor  ☐ UNV 1100
☐ Accessibility Resource Center (ARC)  ☐ Tutoring
☐ TRIO Programs  ☐ Resource Learning Lab
☐ Career Center  ☐ Writing Center
☐ Counseling and Psychological Services (CAPS)  ☐ Military and Veteran Services
☐ Other _______________________________________

Mary Livermore Library
### Section 2: Course Schedule and Availability

<table>
<thead>
<tr>
<th>Course Number</th>
<th>Meeting Days &amp; Times</th>
<th>Credit Hours</th>
<th>Previous grade (if repeating course)</th>
<th>Target grade</th>
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You may choose to print a copy of your schedule in Braveweb and attach it to the intake packet instead of entering it above.

Total number of credit hours you are taking this semester _________
Please note that students on academic probation are not permitted to enroll in more than 13 credit hours.

Semester/term GPA needed to raise my cumulative GPA to a 2.0 _____________

Do you have, or plan to have, a job this semester?  □ Yes   □ No
If applicable, please indicate the number of hours per week you will be working.
If you have a regular work schedule, please include that below.
__________________________________________________________________________
__________________________________________________________________________

List ALL other commitments that you have this semester and estimate the number of hours you expect to spend on each activity. Please include athletics, sororities/fraternities, clubs/organizations, religious activities, etc. If any of these activities have regular meeting times, please indicate that below.
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
Think about the last semester you were enrolled at UNCP. In what area(s) did you improve? What area(s) still need work? This will help us to determine how we can assist you this semester.

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Please print an updated copy of your Academic Transcript from Braveweb > Banner Self Service and bring it with you to your intake appointment.
**Section 4: Semester Goals and Action Plan**

Use this section to develop at least three personal and/or academic goals to accomplish this semester. Decide what you need to do to accomplish each goal by creating an action plan. As a final step, think about the challenges or obstacles you might encounter that would interfere or prevent you from accomplishing your goals and decide how you can overcome them.

You may choose to complete this section with a counselor during your intake appointment.

<table>
<thead>
<tr>
<th>Goal #1</th>
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<tbody>
<tr>
<td>Action Plan: how will I achieve this goal?</td>
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<tr>
<td>Obstacles that I may face</td>
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<td>Strategies for overcoming obstacles</td>
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<th>Goal #2</th>
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<tr>
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<th>Goal #3</th>
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<td>Action Plan: how will I achieve this goal?</td>
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<td>Obstacles that I may face</td>
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<td>Strategies for overcoming obstacles</td>
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I plan to use the following resources to support my plan:

☐ Academic Advisor
☐ Advising Center
☐ Professor/Instructor
☐ Accessibility Resource Center (ARC)
☐ TRIO Programs
☐ Career Center
☐ Counseling and Psychological Services (CAPS)
☐ Other ________________________________
☐ Academic Support Center
☐ STAR Program
☐ UNV 1100
☐ Tutoring
☐ Resource Learning Lab
☐ Writing Center
☐ Military and Veteran Services
☐ Mary Livermore Library

Explanation of how I will use these resources to reach my academic and personal goals this semester: __________________________________________
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Section 6: STAR Program Options

You have the option of participating in individual sessions or group sessions; or you may request to participate in both. Students will be sorted into groups by greatest area(s) of need, according to intake and assessment results.

You will have an opportunity to discuss each of these options with a counselor during your intake appointment. Please wait to make your selection.

I would like to participate in the following STAR Program activities:

☐ Weekly group meetings

☐ Individual meetings (8 per semester)

☐ Both group and individual meetings

☐ I do not want to participate in any STAR Program activities. I agree to complete the assessments at the beginning and end of the semester.

Student Signature ____________________________ Date ____________
Counselor Signature ____________________________ Date ____________

If you have any questions about this paperwork or need to schedule an appointment, please contact:
Courtney Walters, MA, LPC, NCC
Student Academic Support Coordinator
Academic Support Center
DF Lowry Building, Room 320
Phone: 910-775-4408
http://www.uncp.edu/asc
courtney.walters@uncp.edu
# Assessments

This section will be completed by a STAR Program Counselor

## Learning and Study Strategies Inventory (LASSI)

- Completion Date ________________
- Completion Date ________________

## College Self-Efficacy Inventory (CSEI)

- Completion Date ________________
- Completion Date ________________

# Meeting Dates

<table>
<thead>
<tr>
<th>Group Sessions</th>
<th>Individual Sessions</th>
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