



Student Academic Concern Statement

(Email/Turn in completed form to your counselor)

Student Name:

Grade:

Date:

Teacher Name:

Class:

Summarize your concern below (remember, to be concise and factual, not emotional when expressing a concern. "My teacher hates me" does not provide any insight into your concern.)

Have you already shared this concern with the teacher? Yes No

Summarize the outcome:

Have you met with your counselor regarding this matter? Yes No

Summarize the action your counselor directed you to take.

Describe how this concern is impacting your ability to be successful in the classroom.

Have you attended a tutoring session with this teacher or in this subject? Note: Yes No

If no, explain why.

Do you utilize StudentVue to check your grades? Yes No

If yes, how frequently?

Have you missed any assignments for this class? Yes No

If yes, why?

What changes do you believe would help you be more successful in this class?

Examples:

- 1) I need more example problems in class so I can do better on my homework.*
- 2) The teacher lectures too much, it would help if we had more time to ask questions in class.*

Office Use Only: