ACADEMIC COACHING INTAKE FORM

Academic Standing __________________________ GPA __________________

Major(s)/Minor(s) __________________________ # of Classes ______

Reason for Visit Today

How did you hear about success coaching?

□ Flyer □ A friend □ Advisor □ Professor □ Other __________________

What brought you to success coaching? (Check all that apply)

□ Low grades □ Time management □ Note taking skills □ Test taking □ Study habits

□ Other __________________

What areas would you like to focus on today?

□ Motivation □ Test strategies □ Organization □ Tutoring □ Writing assistance

□ Other __________________

Are there specific concerns or challenges you would like to address with a success coach?

FOR OFFICE USE ONLY:

Success Coach __________________________ Meeting Time __________________

Financial Aid Requirements __________________ Meeting Date __________________

Notes ________________________________

University Advising and Academic Support Center
Memorial Hall 024, 1 University Circle, Macomb, IL 61455-1390
Tel 309.298.1846 or 309.298.1871 Fax 309.298.2311 or 309.298.3163 www.wiu.edu/uaasc


**Academic Habits**

What academic assistance resources have you used before?

- [ ] Success Workshops
- [ ] Tutoring
- [ ] University Writing Center
- [ ] Disability Resources
- [ ] None

- [ ] Other ___________________________________________________________

If none, which would you be interested in learning more about?

________________________________________________________________________

How do you stay organized?

- [ ] Planner
- [ ] Binder
- [ ] Google calendar
- [ ] White board

- [ ] Other ___________________________________________________________

What is your preferred style of learning?

- [ ] Auditory (listening, hearing)
- [ ] Visual (pictures, shapes, colors)
- [ ] Kinesthetics (moving around, hands on)

- [ ] Other ___________________________________________________________________

How do you relieve stress?

____________________________________________________________________

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**EXPERIENCE**

Current Employment Status:  
- [ ] Un-employed
- [ ] On Campus
- [ ] Off Campus
- [ ] Part Time
- [ ] Full Time
- [ ] Internship

Position title ___________________ Employer_______________________ Avg hours a week _______

Current Residence:  
- [ ] On Campus
- [ ] Off Campus Housing
- [ ] Off Campus (home)
- [ ] Online Only

Roommates?  
- [ ] Yes
- [ ] No

Average Commute ________

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**IN Volvement**

Extracurricular Involvement

Position title ___________________ Organization_______________________ Avg hours a week _______

Position title ___________________ Organization_______________________ Avg hours a week _______