Developmental Education Program
Student Interview Survey

Name: __________________________   ID#:__________________________ Date_________
E-mail:__________________________   Phone:  __________________ 1st Gen.   ___Yes ___No
Ethnicity* ___White ___Black ___Hispanic ___Asian Pacific ___Native Am ____International ___Other
*Request regarding your ethnic background is for statistical purposes only.               Class status______ G.P.A._____

The Academic Student Achievement Plan is tailored to meet your academic individual needs. In order to help us do this, please answer the following questions. For any questions you may not be prepared to answer today, you will have an opportunity to answer during your follow-up visit.

1. Check Appropriate:   ☐ New Student       ☐ Transfer Student       ☐ Returning Student
   If Transfer Student, do you hold an Associates or Bachelors Degree? Yes/No.
   From: ______________________________________________

2. What area(s) are you THEA liable (not passed) in: READING  MATH  WRITING
   (circle appropriate)
   What do you need to do to complete THEA: (circle appropriate)
   (A) Pass class          (B) Retake THEA @_______
   minimum score          (C) Pass class and Retake THEA
                          @_______ minimum score

3. What do you hope or would like to accomplish through the Academic Achievement Program (AAP; this office)?

4. Which college subjects/material do you think you will need help with?________________________
Which tutors are you currently working with this semester?
   If writing liable, how many sessions have you completed with the Writing Consultants?____sessions.

5. Military experience: Were you honorably discharged, retired or released from active duty?
   __Yes__ No      Date of discharge: ________________

6. Are you currently employed? _____Yes ____ No
   If yes, how many hours per week are you working? _____ If no, will you be looking for a job?_______
   What hobbies/activities are you currently a member of or are interested in?____________________

7. Tell me about your home environment? Do you live on campus, off campus? Do you have transportation? Will you need to take the bus to campus?

8. How many hours do you study/ do homework each week? ________________________________.

9. Are you currently on scholastic probation? _____Yes ____No

10. What concerns would you like to discuss with the Academic Intervention Specialist (AIS; this office)? Remember we are here to help you!