

PROGRESS REPORT

College of Dentistry
The University of Iowa

Student Name: _____ Date: _____

Course No. and Title: _____

At mid-point you are at risk of earning below C based on your performance and the requirements you have completed at this point in the above course. Please see your instructor, clerkship director, or group leader for assistance and feedback.

Instructor, Clerkship Director or Group Leader

Send an electronic copy to the student after meeting with them, a second copy to the Dental Registrar and a third copy keep for department files.

Suggested recommendations that may assist you:

Tutoring

Follow up with Course Director

Counselor for: study strategies, test-taking strategies, time management, or other

Peer or group reviews/ studying

Other

Student elected not to meet with me.