



Intervention Meeting and Strategy Form

This form is to be used to record details of the intervention meeting to address unsatisfactory course progress requirements.

| | |
|---------------|--------------|
| Student Name: | |
| Student ID | |
| Course Code: | Course Code: |

Record the reasons given by student for their poor academic performance/attendance:

Recommended strategies and interventions as discussed with the student:
(Tick ✓ the most appropriate)

- Regularly attend lectures and tutorials.
- Attend academic skills programs.
- Attend course-specific additional tutorials.
- Attend study clubs or study groups.
- Attend English language support classes.
- In conjunction with the student, reviewing learning materials and providing students with information in a context that they can understand
- Provide extra time to complete tasks
- Provide access to supplementary or modified materials
- Provide supplementary exercises to assist understanding
- Receive assistance with personal issues which are influencing academic progress.
- Attend mentoring and attending counseling sessions.
- Being placed into a suitable alternative course within a program or a suitable alternative program.
- Reduction in enrolment load with a combination of one or more of above
- The student has been informed continuing unsatisfactory course progress may result in being reported to DHA.

Officer Signature

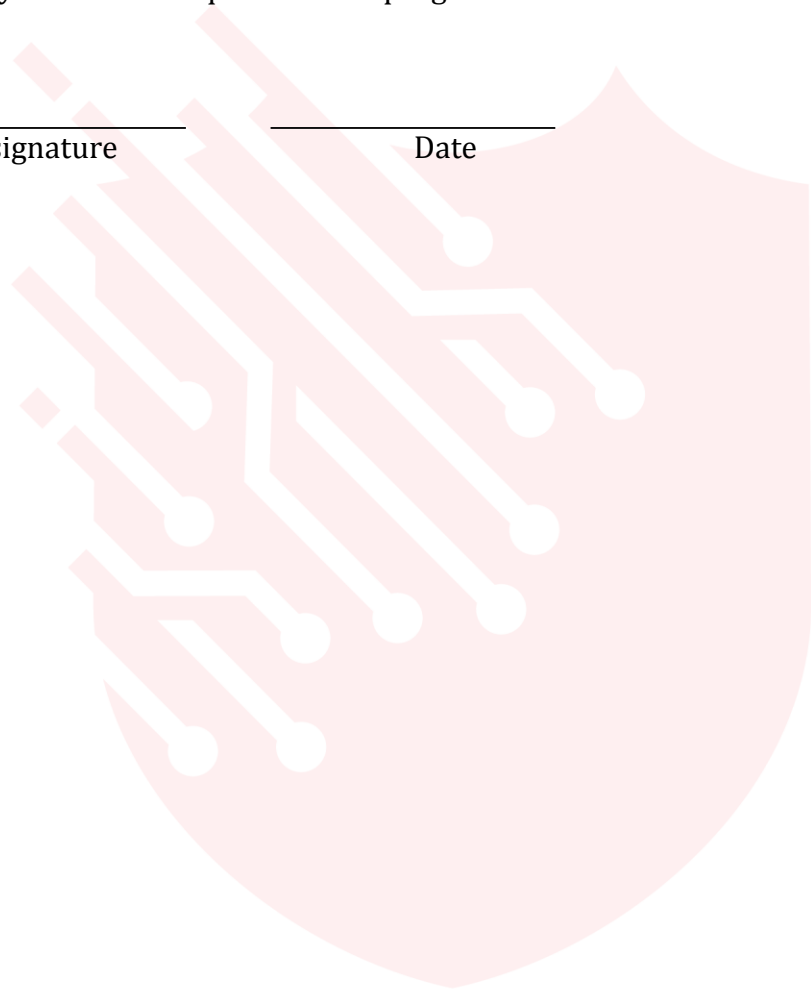
Date



- I agree to the intervention strategy activated to assist me in meeting satisfactory course progress and I will comply with all of the recommendations ticked above.
- I understand that a copy of this agreement will be kept on file and may be used to assist MGIT in any and all subsequent course progress determinations.

Student signature

Date





Meeting Number: 1

Meeting Date: _____

Record discussion and outcomes of each fortnightly meeting to discuss progress. Any adjustments to the strategy should be recorded.



This is a true and accurate record of the meeting to discuss the ongoing intervention strategy.

Trainer/assessor signature: _____

Date: _____

Student signature: _____

Date: _____



Meeting Number: 2

Meeting Date: _____

Record discussion and outcomes of each fortnightly meeting to discuss progress. Any adjustments to the strategy should be recorded.



This is a true and accurate record of the meeting to discuss the ongoing intervention strategy.

Trainer/assessor signature: _____

Date: _____

Student signature: _____

Date: _____