

School of Nursing Junior Review

Student Name: _____

Advisor: _____

Date of meeting: _____

This form should be completed during the student's School of Nursing Junior Review meeting with their faculty advisor. Please check off each topic as it is discussed.

___ Review the student's CAPP report:

- Is the number of credits assigned correct?
- Has the student met all entrance requirements?
- Does the student agree with how credits have transferred?
- Does the student agree with the number of courses remaining for graduation, both general education and nursing?

___ Review the student's plan for their remaining 2 years of study:

- Is this plan realistic?
- Have all gen eds been accounted for?
- Does the student have a plan for their Senior II semester (full or part-time)? If the student intends to go part-time, have they discussed this with the Office of Financial Aid?
- Is the student aware of the 32 hour rule?
- Is the student aware of post-matriculation gen ed restrictions?

___ Discuss nursing coursework to date:

- What are the student's strengths?
- Where does the student struggle?
- What advice does the advisor have for the student as s/he moves forward?

___ Review/discuss ATI exams and scores to date:

- **Student should bring paper copies of all ATI test results to the meeting to review with their advisor.**
- What questions does the student have about the ATI?
- What plan does the student have to improve ATI scores?

___ Discuss the portfolio

- What has the student completed to date?
- What questions does the student have about the portfolio?

Comments: _____

In signing this document, we agree that all of the above points have been addressed to our satisfaction.

Advisor Signature: _____

Student Signature: _____

The student should return this signed and completed form to the School of Nursing office no later than