

SUNY Polytechnic Institute Registrar's Office

# Mid-Semester Deficiency notice

100 Seymour Road, Utica, New York 13502

TO: \_\_\_\_\_  
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SUNY Poly ID#

FALL     SPRING     SUMMER    YEAR: \_\_\_\_\_

THE INSTRUCTOR HAS EVALUATED YOUR WORK TO DATE FOR THE ABOVE COURSE AND DETERMINED THAT YOU CURRENTLY ARE EARNING A GRADE OF \_\_\_\_\_. IT IS SUGGESTED THAT YOU CONTACT THE INSTRUCTOR, YOUR ACADEMIC ADVISOR, and/or THE LEARNING CENTER TO DISCUSS WHAT CAN BE DONE TO IMPROVE YOUR ACADEMIC PERFORMANCE.

Course Abbrev. (i.e. CSC)	Course Number	Section
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\_\_\_\_\_  
INSTRUCTOR'S NAME (Please Print)

**INSTRUCTOR PLEASE NOTE:** Complete one form for each student found to be doing "D" or "F" work in your course. Complete all data except for the address. Retain the gold copy and send all other copies to the Office of the Registrar for distribution.

\_\_\_\_\_  
Instructor Signature

\_\_\_\_\_  
Date