

**COLLEGE OF ARTS AND SCIENCES**  
**Mid-Semester Academic Progress Report**  
**Indiana University – Bloomington**

Dear Instructor:

I would appreciate your help in determining this student's eligibility to register through Continuing Student Registration for upcoming term(s). Please indicate the student's estimated current grade and attendance for your class in the space below, and return this form **to the student** who will turn it in to me **at least one week prior** to the Automatic-Withdrawal Deadline for the current semester. This estimated grade is strictly for advising purposes only, and I will consider it with other grade estimates when counseling this student about potential withdrawals and other schedule modifications.

My telephone number is (812) 855-1647. Please call if you have any questions.

Sincerely,

W. David Halloran  
Assistant Dean  
College of Arts and Sciences  
Indiana University  
Kirkwood Hall 012  
Bloomington, IN 47405  
whallora@indiana.edu

**To be completed by Student:**

Student's name: \_\_\_\_\_

Department and course number: \_\_\_\_\_

**To be completed by Instructor**

Current estimated letter grade:    A      B      C      D      F      No Grades Recorded  
(Please circle one)

Class attendance estimate:          0      1 - 2    3 - 5    6+          Attendance Figures Unavail.  
(Please circle number of absences)

Please include any comments you wish to make about the student's performance in your course.

Instructor's Signature: \_\_\_\_\_

Instructor's Name (Please print): \_\_\_\_\_

Date: \_\_\_\_\_