

STEPHEN F. AUSTIN STATE UNIVERSITY  
SCHOOL OF NURSING  
COUNSELING FORM  
FORM 22  
(Form Revision – 12/2015)

Check One: \_\_\_\_\_ *Clinical Counseling Form Only*                      \_\_\_\_\_ *Counseling Form with F Day*  
                                 \_\_\_\_\_ *Academic Counseling Form Only*

Date of Conference: \_\_\_\_\_ Course Number: \_\_\_\_\_

Name of Student: \_\_\_\_\_

**Reason for Conference:**

**Recommended Action:**

**Comments:**

Note: Lack of completing work on time can result in a failed course. Lack of completing clinical work on time can result in clinical F Days which can also result in a failed course. The third (3<sup>rd</sup>) clinical F Day in a course immediately results in failure of that course. An accumulation of five (5) clinical F Days in the nursing program results in immediate dismissal from the program (see Policy No. 22).

\_\_\_\_\_  
Signature of Student/Date Signed

\_\_\_\_\_  
Signature of Faculty Member/Date Signed

\_\_\_\_\_  
BSN Coordinator

\_\_\_\_\_  
Date

**DIRECTOR'S SIGNATURE ONLY REQUIRED ON F DAYS.**

\_\_\_\_\_  
Signature of Director, SON

\_\_\_\_\_  
Date