

DNP-Population Health & Systems Leadership Quarterly Progress/Planning Form

Name of Student (Last, First, MI)	Year Admitted	Date of Advisement (Quarter, Year)	Status (Full-time or Part-time)

You will need to complete this form every quarter you are enrolled as a student. Please complete the following sections of this form and email to your advisor <u>at least 2 weeks before your quarterly advisement meeting</u>. You may use additional space, if needed. You will receive feedback on your completed form from your Academic Advisor via email. Once you have received and incorporated emailed feedback (if any) from your advisor, sign and send a copy to your advisor for their electronic signature. You will then submit the form to Student and Academic Services via email to be added to your student file.

I. ACADEMIC PLANNING

- 1. Please list courses for which you are currently enrolled:
- 2. Please list courses you will register for next quarter (check the UW and Professional & Continuing Education time schedules to verify course offerings):

II. REFLECTION ON LEARNING PROCESS

- 1. Describe skills or content expertise you have acquired this quarter that have contributed to your understanding of *population health*.
- 2. Describe skills or content expertise you have acquired this quarter that have contributed to your understanding of *nursing leadership in population health*.

III. ACADEMIC AND PROFESSIONAL GOALS

1. Describe 1-2 **academic goals you have for this year**. Note: Make sure your goals are SMART (specific, measurable, achievable, realistic, and time-bound). If your goal has changed since last quarter, describe the change(s), if applicable.

2. Describe 1-2 **professional goals you have for this year**. Note: Make sure your goals are SMART (specific, measurable, achievable, realistic, and time-bound). If your goal has changed since last quarter, describe the change(s), if applicable.

3. What skills or expertise do you need to acquire to achieve your academic and/or professional goal(s)?

IV. ACADEMIC AND PRACTICE COLLABORATIONS

1. Describe any academic connections you have made this quarter (e.g., faculty, student organizations, campus initiatives) and how you envision those connections contributing to your academic and/or professional goals.

2. Describe any practice-based or community connections you have made this quarter (e.g., community or professional organizations, community members or stakeholders) and how you envision those connections contributing to your academic and/or professional goals.

V. STUDENT ACCOMPLISHMENTS

Please list any awards or scholarships you have applied for or received, scholarly activities (e.g., conference abstract submission or presentation), or any professional or community service you have completed this quarter:

VI. FACULTY ASSESSMENT OF STUDENT PROGRESS

VII. STUDENT AND FACULTY SIGNATURES

Student Signature	Date	Faculty Signature	Date
Student Name (printed)		Faculty Name (printed)	