

Appendix G
School of Music, Theatre & Dance
Department of Dance
Recovery Plan of Action Form



SCHOOL OF
MUSIC, THEATRE & DANCE
UNIVERSITY OF MICHIGAN

Recovery Plan of Action Form

The Recovery Plan of Action form assists students and teachers in articulating a detailed record of plans for alternative work during the student's recovery from illness or injury. It also provides a description of modifications for class participation as recommended by health care professionals. Please complete one form for each course affected. Once complete, retain a copy of this form for your records and submit the original to the Department of Dance office at 1327 Geddes Ave.

Illness / Injury Information

Student Name: _____ UMID: _____

Major: _____ Class Year: _____

Course Name: _____ Course Number: _____

Instructor: _____ Date of Illness/Injury: _____

Please attach a note from a qualified health care professional that includes any recommendations for modifications to class activities.

Plan of Action for Missed Course Work

Please attach a separate piece of paper detailing alternative work agreed upon in discussion with your instructor, including due dates for the work.

-OR-

Please indicate below your intent to withdraw from the course if you have determined that this is in your best interest.

_____ I intend to drop. I am attaching the necessary health care professional documentation.

Approval

Student Signature

Date

Instructor Signature

Date

Advisor Signature

Date

This document will only be released with written permission from the student or pursuant to the University's FERPA policy. It will be destroyed after three years after the student is no longer enrolled. The student will have access to this document but you may specify that this access be given when there is a person qualified to explain the document is available.