


**ALLEN COLLEGE – UNITYPOINT HEALTH  
STANDARD OPERATING PROCEDURE**

Supersedes: New

No: 2-L-900-02  
Last Review Date: May 2023  
Required Review Date: May 2027  
Administrative Unit: Undergraduate Nursing  
APG Comm.

Approved By:

  
\_\_\_\_\_  
Jared Seliger, PhD, CNMT  
President

**SUBJECT:** BSN Student Learning Contracts

**PURPOSE:** To provide a uniform method by which to implement and complete learning contracts

**EFFECTIVE  
FOR:** Undergraduate nursing faculty and students

**POLICY/PROCEDURE:**

1. Learning contracts are created and implemented to facilitate student success.
2. Examples of when learning contracts may be used include, but are not limited to, issues related to class attendance/participation, classroom/clinical performance in multiple courses, timeliness, repeating course(s), readmission, or incivility.
3. Learning contracts shall be developed by the faculty member with assistance from the Dean or Assistant Dean, School of Nursing, as needed.
4. Learning contracts shall be followed and completed as outlined by the faculty member or administrator who has developed the contract.
5. The faculty/administrator and a third-party representative from the college, acting as an observer, shall meet with the student to present and review the learning contract.
6. Learning contracts shall be in effect even if a student refuses to sign the learning contract.
7. As applicable, students shall submit completed learning contracts to the faculty member or administrator by the identified deadline/due date.
8. Consequences for not completing the learning contract shall be identified on the contract. These may include, but are not limited to, lowered course grade, failure of a course assignment, course/clinical failure, or dismissal from the program.
9. Learning contracts shall be stored in the student's electronic academic file.

## Learning Contract

**Purpose:** The purpose of this form is to have a standard mechanism for documenting and following up with students who have a learning contract.

**Student Name:** \_\_\_\_\_

**Number/Name of Course:**

**Faculty:**

**Rationale for learning contract:**

**In order to improve/be successful, the following action(s) need to be taken by the student:**

**Consequences for failure to complete the learning contract:**

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Faculty/Administrator Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Third Party Representative Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

This contract will be shared with faculty and staff as appropriate.  
This contract will be placed in the student's electronic academic file.