



**BELLEFONTE AREA SCHOOL DISTRICT
HOME/CHARTER SCHOOL
WEEKLY ACADEMIC REPORT**

Academic Week of: _____

Eligibility Week of: _____

SPORT: _____

STUDENT NAME: _____

Please list the number of credits the student is attempting: _____

A STUDENT IS INELIGIBLE TO PARTICIPATE IF ANY OF THE FOLLOWING CATEGORIES APPLY:

1. He/She has failed two or more courses (high school, middle school)
2. He/She is not passing a minimum of five (5) credits or credit equivalent.
3. A student carrying less than five (5) total credits must be passing all classes.
4. He/She is not eligible to be promoted to the next grade.

Please list subjects the student is currently taking and the **numerical** grade earned for the week. Please circle all failing grades.

Subject:	Credit:	Grade:

THIS FORM IS DUE WEEKLY IN THE ATHLETIC DIRECTORS OFFICE BY FRIDAY AT NOON. FAILURE TO TURN IN THIS WEEKLY FORM ON TIME WILL RESULT IN THE LOSS OF ELIGIBILITY FOR ONE WEEK. THE FORM CAN BE DROPPED OFF AT THE HIGH SCHOOL MAIN OFFICE OR EMAILED TO athleticdirector@basd.net

PARENT SIGNATURE _____

DATE _____

HOME PHONE _____