

**MIDDLE SCHOOL
ACADEMIC/BEHAVIOR RATING SHEET**

Student's Name: _____

Grade/Team: _____

Sport/Activity: _____

Date: _____

Before a student is allowed to participate in tryouts or practice for a team/activity, he or she must have an Academic/Behavior Rating Sheet completed by **each** teacher and turned in to the Student Services office. (In a teacher's absence, guest teachers may **not** complete this form.) This information will be used by coaches/sponsors to make team/activity selection decisions.

Academic/Behavior Rating

Excellent = EX Good = GD Average = AV Needs Improvement = NI

Period	Subject	Academic Rating	Behavior Rating	Teacher's Signature	Comments
1					
2					
3					
4					
5					
6					