

St. Louis Gamers
Academic Review Program - High School Age Players
Attach Most Recent Report Card to this Form

Date	
------	--

Name	
Team	
Current Grade Level	
High School	
Graduation Year	

Cumulative GPA		GPA Max = _____
----------------	--	-----------------

Current Qtr/Semester GPA	
--------------------------	--

High School GPA Goal	
----------------------	--

Check one

Academic Curriculum		Some below grade level courses
		At Grade Level courses
		Some Advanced/Honors Classes

Self Assessment "How am I doing versus my goals?" "Do I need to do something different?"	
------------------------------------------------------------------------------------------------	--

I have read the Gamers informed consent policy regarding reports cards. I give my permission to the Gamers Directors and Coaches to review quarterly report cards and to make use of the information in the ways described.

Player's Signature Date

Parent or Guardian's Signature Date