St. Louis Gamers Academic Review Program - Middle School **Attach Most Recent Report Card to this Form**

Date			
Name			
Team			
Current Grade Level			
Middle School Name/Location			
HS Graduation Year			
Cumulative Middle School GPA			If no GPA is provided by middle school, then describe cumulative grades to date
Current Qtr/Semester GPA			If no GPA is provided by middle school, then describe quarter or semester grades
current Quy semester GrA			or semester grades
Middle School GPA Goal			If no GPA provided by middle school, describe academic
Middle School GPA Godi			goals
	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 Directors and Coaches to review quarterly repor			
Player's Signature Date	<u>-</u>	Parent or Guardian's Signature	Date