

College Credit Plus
~~South Range~~ High School
High School Athlete Eligibility Form
To be completed every nine weeks

Student Name _____

Address _____

City/State/Zipcode _____

Home Phone _____ Cell phone _____

This form is for the following grading period: 1st nine weeks 2nd 3rd 4th

Dear Professor/Instructor,

In an effort to help our students succeed in college and to address any academic achievement concerns, would you please indicate the current grade and days missed for the above student and sign as indicated on this form. Thank you for your time in completing this form.

Course Name: _____

Meeting Day/Time: _____

Days Missed: _____

Current Course Grade: _____

Signature: _____

Please return this form to the student in the provided envelope (sealed) or mail to:

Ericka Burkey
11300 Columbiana-Canfield Rd.
Ste H.
Canfield, OH 44406
330-549-2163, ext. 39106

Professors may also email grades and attendance to eburkey@southrange.org