

Cesar E. Chavez High School ASB Grade Check Form

Student: _____ ID # _____ Probation: _____ Date Checked: _____

ASB EXECUTIVES AND SENATORS ARE REQUIRED TO SUBMIT GRADE CHECK TO ASB DIRECTOR EVERY QUARTER TO ENSURE ELIGIBILITY REQUIREMENTS ARE CONTINUOUSLY MET. TEACHERS: PLEASE SUBMIT THE MOST UP TO DATE LETTER GRADE AVAILABLE.

Period	Subject	Teacher	Grade	Signature	Comments and Assignments Tutorial – Please date and initial
1					
2					
3					
4					
5					
6					
7					

Athletic Director Signature: _____

Parent Signature: _____

Title: _____