



# Extra –Curricular Eligibility Appeal Hearing Request Form

(This form must be submitted to your assistant principal no later than 5 days after the start of a season or 3 days after report cards are issued)

Name: \_\_\_\_\_

Team/Club: \_\_\_\_\_

School: \_\_\_\_\_

Assistant Principal: \_\_\_\_\_

Coach/Advisor: \_\_\_\_\_

Guidance Counselor: \_\_\_\_\_

Is this your first appeal? \_\_\_\_\_

Please list the classes that were failed last marking period

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Summarize why you were unsuccessful in the(se) class(es), and how do you plan on being more successful going forward.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Parent Name (print)

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Contact Number

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date