



# Pop Warner Little Scholars, Inc. EASTERN REGION

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

Organization: \_\_\_\_\_

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

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

Dear School Administrator/Teacher,

This form is to be completed by those participants in the Pop Warner program that have not met the National Scholastic Requirement of 70 percent and/or 2.0 Grade Point Average (GPA).

***This form shall ONLY be used if your School District does not supply its Students/Parents a progressing progress report or report card, dated between the required dates on the National Scholastic Eligibility form to be eligible for play after the end window date set on the National Scholastic Eligibility Form..***

If no progressing progress report or report card is given in this window then the player shall be found ineligible for the rest of the year.

**Form must be an original with signatures and School Stamp to be deemed in compliance no copies or faxes will be accepted**

**Language Arts:** \_\_\_\_\_

Date: \_\_\_\_\_

Positive Progress (circle one): Yes No

Teacher's Printed Name: \_\_\_\_\_

Teacher's Signature: \_\_\_\_\_

**Math:** \_\_\_\_\_

Date: \_\_\_\_\_

Positive Progress (circle one): Yes No

Teacher's Printed Name: \_\_\_\_\_

Teacher's Signature: \_\_\_\_\_

**Science:** \_\_\_\_\_

Date: \_\_\_\_\_

Positive Progress (circle one): Yes No

Teacher's Printed Name: \_\_\_\_\_

Teacher's Signature: \_\_\_\_\_

**Social Studies:** \_\_\_\_\_

Date: \_\_\_\_\_

Positive Progress (circle one): Yes No

Teacher's Printed Name: \_\_\_\_\_

Teacher's Signature: \_\_\_\_\_

**Other:** \_\_\_\_\_

Date: \_\_\_\_\_

Positive Progress (circle one): Yes No

Teacher's Printed Name: \_\_\_\_\_

Teacher's Signature: \_\_\_\_\_

Affix School Stamp Here