

Tri-County Schools

Academic Eligibility Clearance Form

Date:

Student:

Class Failing or Incomplete:

Teacher signature: _____

*By signing this form you declare that this student is currently
passing and has completed all outstanding work.*

Principal's Office: _____

This form is to be used by students who are participating in a extra-curricular activity. As a student it is **your responsibility** to have this form signed by the teacher once you are passing the class, and/or have turned in all incomplete work.

- Take this form to:
1. Teacher
 2. Principal's Office
 3. Your coach *or* instructor