

**Stallion Youth Football and Cheerleading
Weekly Eligibility Feedback Form Grade ____#____**

Teacher Portion

Students Name _____ Week Ending _____

5-Excellent 4-Good 3-Satisfactory 2-Improving 1-Needs Improvement 0-Poor

Reading or English _____ Math _____

Behavior _____

Comments (Optional)

Teachers Signature: _____

Parents Portion

5-Excellent 4-Good 3-Satisfactory 2-Improving 1-Needs Improvement 0-Poor

Homework Effort _____ Behavior _____

Comments (Optional)

The player has my permission to participate in this week's game. _____

Parent/Guardian Signature _____