

**SLC INTERSCHOLASTIC ELIGIBILITY
STUDENT RETURN FORM**

Name: _____ **Grade:** _____

Student has reported to class during activity period on the available scheduled days Monday-Friday, the student is:

_____ **Passing** **Date:** _____

_____ **Failing** **Date:** _____

Subject: _____

Teacher Signature: _____

If student is ineligible for 2 or more subjects, time must be divided among the subjects Monday-Friday. Student has reported to class during activity period on the available scheduled days Monday-Friday, the student is:

_____ **Passing** **Date:** _____

_____ **Failing** **Date:** _____

Teacher Signature: _____

Student Signature: _____

Guidance Counselor Signature: _____ (for Clubs)

Athletic Director Signature: _____ (for Athletics)

Student may not return until all signatures are complete in the order presented. The student must turn this slip into the Athletic Director or Building Principal by lunch time on Friday.