



TEXAS 4-H STUDENT ACADEMIC STATUS FORM (LIST)

The use of this form is only permitted for activities dated prior to July 1, 2021.

The information requested is in accordance with the Texas Education Agency & UIL Side-by-Side (2020-2021) policies as it relates specifically to **Academic Requirements (No Pass No Play)**.

School District/Campus: _____

Date of Activity: _____ Name of Activity: _____

Academic Status & Attendance Declaration by School Principal or Designee *To be completed by the School Principal or their designee.*

Please respond to each of the three items below independently of one another based on the following descriptions provided.

- Academic Status:** In accordance with TEA & UIL Side-by-Side Academic Requirements, this declaration is based solely on the student's academic performance standards (*Passing or Not Passing*) and is not based on the mode of instruction or extracurricular activity policy changes due to COVID-19.
- School Absence:** In accordance with local school attendance policies and requirements, will their absence will and excused absence be granted?
- Activity Participation:** In relation to the activity referenced above, is there any local district policy that prohibits this student from attending or participating in the activity?

Student's Name	Grade	Academic Status	School Absence	Activity Participation	
		Passing or Not Passing (check one)	Excused Absence (check one)	Does local policy prohibit their attendance or participation in this activity? (check one)	Only respond if you check "YES" in the previous column. Is this <u>local policy</u> due to the ongoing pandemic (COVID-19)?
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →	<input type="checkbox"/> DUE to COVID-19 <input type="checkbox"/> NOT DUE to COVID-19
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →	<input type="checkbox"/> DUE to COVID-19 <input type="checkbox"/> NOT DUE to COVID-19
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →	<input type="checkbox"/> DUE to COVID-19 <input type="checkbox"/> NOT DUE to COVID-19
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →	<input type="checkbox"/> DUE to COVID-19 <input type="checkbox"/> NOT DUE to COVID-19
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →	<input type="checkbox"/> DUE to COVID-19 <input type="checkbox"/> NOT DUE to COVID-19
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →	<input type="checkbox"/> DUE to COVID-19 <input type="checkbox"/> NOT DUE to COVID-19

Printed Name: _____ Principal/Designee Signature: _____ Date: _____

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TEXAS 4-H STUDENT ACADEMIC STATUS FORM (LIST) *continued*

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<u>Student's Name</u>	<u>Grade</u>	<u>Academic Status</u> <i>Passing or Not Passing (check one)</i>	<u>School Absence</u> <i>Excused Absence (check one)</i>	<u>Activity Participation</u> <i>Does local policy prohibit their attendance or participation in this activity? (check one)</i>
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →
		<input type="checkbox"/> PASSING <input type="checkbox"/> NOT PASSING	<input type="checkbox"/> GRANTED <input type="checkbox"/> NOT GRANTED <input type="checkbox"/> Does not apply	<input type="checkbox"/> NO <input type="checkbox"/> YES. If "Yes", then →

Only respond if you check "YES" in the previous column. Is this **local policy** due to the ongoing pandemic (COVID-19)?

Printed Name: _____ Principal/Designee Signature: _____ Date: _____

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