



## BVAL Academic Athletic Probation Request

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

Athlete Name: \_\_\_\_\_

Sport and Season: \_\_\_\_\_

Year in School (circle one): (FR) (SOPH) (JR) (SR)

Grading period: \_\_\_\_\_ Present GPA: \_\_\_\_\_

Units passed: \_\_\_\_\_ Units attempted: \_\_\_\_\_

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I request the above-mentioned student/athlete be granted academic probation.

Signed: \_\_\_\_\_  
(Head Coach)

I approve of the request stated above.

Signed: \_\_\_\_\_  
(Athletic Director)

Signed: \_\_\_\_\_  
(Parent/Guardian)

Length of probation period: \_\_\_\_\_ (number of weeks) cannot extend beyond the current grading period.

Signed: \_\_\_\_\_  
(Principal)

**Please email completed form to BVAL Commissioner at [ckirk@sjusd.org](mailto:ckirk@sjusd.org)**

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