



# Freshman Academic Monitoring Card

## Tutorial Session Check

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

Sport: \_\_\_\_\_

Academic Progress Report:

Week of: \_\_\_\_\_

Monday	Tuesday	Wednesday	Thursday	Friday

Period	Subject	Teacher	Passing (yes or no)	Academic Progress (Inc. work, behavior, etc)	Teacher signature
1					
2					
3					
4					
5					
6					
7					