

**Coppell Independent School District**

**- MIDDLE SCHOOLS -  
OFF-CAMPUS PHYSICAL EDUCATION REPORT CARD  
2008-2009**

Student's Name \_\_\_\_\_

Campus \_\_\_\_\_

Counselor's Name \_\_\_\_\_

Grade \_\_\_\_\_

*Grades must be submitted to the Counselor one week prior to the end of the six weeks.*

<b>Six Weeks</b>	<b>Date Due to Counselor</b>	<b>Grade</b>	<b>*Citizenship Grade</b>	<b>Dates of Absences</b>	<b>Instructor's Signature</b>
<b>1<sup>st</sup></b>	<b>September 26, 2008</b>				
<b>2<sup>nd</sup></b>	<b>November 7, 2008</b>				
<b>3<sup>rd</sup></b>	<b>January 9, 2009</b>				
<b>4<sup>th</sup></b>	<b>February 20, 2009</b>				
<b>5<sup>th</sup></b>	<b>April 10, 2009</b>				
<b>6<sup>th</sup></b>	<b>May 28, 2009</b>				

**\*Citizenship Grades:**

- E Excellent
- S Satisfactory
- N Needs Improvement