

Tennessee Secondary School Athletic Association

**Academic Achievement Award
Team**

I, _____, request that _____ be
(Principal) (School Name)

recognized for academic achievement in _____ . This team
(Sport)

collectively earned a _____ Grade Point Average (3.00 – 3.24 Outstanding, 3.25 – 4.00

Distinguished) at the conclusion of the (1st Semester 2nd Semester) of the _____ - _____
Circle One

school year. The total number of participants on the team was _____ .

(Principal's Signature)

(Coach's Signature)

(Guidance Counselor's Signature)

(Date)

School: _____

Address: _____

City: _____ Zip: _____

Fax to TSSAA: (615) 889-0544

ACH-01