

Leadership Thursday Verification Form

Quarter: _____

Name: _____

CIF #: _____

Advisory Teacher: _____ Advisory Number: _____

Name of Extracurricular Activity: _____ Date of Participation (from start to end/current): _____

In-Season Activity:

Active Participation (1000 pts)

Leadership Position (1000 pts)

Varsity Participation (1000 pts)

Year-Round Activity:

Active Participation (500 pts)

Leadership Position (500 pts)

Total Points Earned: _____

To confirm that you've actively participated in the Extracurricular Activity written above, please get the Coach's/Advisor's name and signature.

Coach/Advisor's Printed Name: _____ Date: _____

Coach/Advisor's Signature: _____ Date: _____

*Note:

- Active Participation simply means you are a regular member of the group
- Leadership Positions include roles such as: President, Vice President, Secretary, & Treasurer
- Varsity Participation applies only to active athletes who are varsity players on the team

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