



Emmanuel Christian Academy  
2177 Emmanuel Way  
Springfield, OH 45502  
Tel: 937-390-3777  
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### PE Credit for ECA Sports Participation

Student Name: \_\_\_\_\_ Graduating class: \_\_\_\_\_

ECA Sport name: \_\_\_\_\_ Dates of season: \_\_\_\_\_

ECA Coach's name: \_\_\_\_\_ Student phone # \_\_\_\_\_

Student signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent signature: \_\_\_\_\_ Date: \_\_\_\_\_

.....  
**To be completed by the coach:**

Completed at least 60 hours of practice, games, etc. \_\_\_\_\_  
(initials)

I believe this student has earned ¼ credit in P.E. \_\_\_\_\_  
(initials)

Coach signature: \_\_\_\_\_ Date: \_\_\_\_\_

Reminder: students must have ½ credit of PE (2 semesters/2 sports) in order to graduate from high school.

Questions-call Mr. Wynn @ 937.390.3777

For Office Use Only: ¼ credit/grade _____
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