Grade Form

Student_____

Instructor_____

Course Number_____ Course Name_____

Semester ☐ Fall ☐ Spring ☐ Summer Year_____

Grade (circle one) A B C F PASS FAIL

Evaluation of Performance:

Your comments should cover some of these areas:

1) Nature and quality of the student's participation and class discussion
2) Outstanding strengths and weaknesses
3) Evidence of learning
4) Level of responsibility (attendance, assignments, etc)

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Signature_____ Date_____

1/04