Great Western Network
ITV Grade Report

Instructor Name :_____ Date : _____
Class Name: _____

*Below, Please list the **letter grades** that were given for each student enrolled in your class. Return copies of this completed form to the building Principal(s). This information is strictly confidential and shall be used for educational purposes only.*

SCHOOL: _____

Name of Student	1st 9 wks	2nd 9 wks	Sem Test	Sem. Grade	Credit Rcvd	3rd 9 wks	4th 9 wks	Sem Test	Sem. Grade	Credit Rcvd	Final Grade
_____	____	____	____	____	____	____	____	____	____	____	____
_____	____	____	____	____	____	____	____	____	____	____	____
_____	____	____	____	____	____	____	____	____	____	____	____
_____	____	____	____	____	____	____	____	____	____	____	____
_____	____	____	____	____	____	____	____	____	____	____	____
_____	____	____	____	____	____	____	____	____	____	____	____
_____	____	____	____	____	____	____	____	____	____	____	____
_____	____	____	____	____	____	____	____	____	____	____	____
_____	____	____	____	____	____	____	____	____	____	____	____
_____	____	____	____	____	____	____	____	____	____	____	____
_____	____	____	____	____	____	____	____	____	____	____	____

* Attention remote sites *
When converting letter grades/percentages, remote schools must follow the intent of the teacher.

Percentage/Letter Grade Conversion Scale:

A+ ___ %	A ___ %	A- ___ %
B+ ___ %	B ___ %	B- ___ %
C+ ___ %	C ___ %	C- ___ %
D+ ___ %	D ___ %	D- ___ %

F ____ % and below

_____ _____
Instructor Signature Date