



- ☐ **Anaheim Main Campus:** 1126 N. Brookhurst St., Anaheim, CA 92801-1701
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FINAL GRADE REPORT

Please use this Form for each course which must be submitted along with **Final Grade Sheet**. This Report must be cleared by the appropriate Program Director/Academic Dean for a Faculty member to receive his/her second (last) pay check for the quarter.

FACULTY NAME _____ **PHONE #** _____
Last First Initial

COURSE # _____ **COURSE TITLE** _____ **UNITS** _____

FOR QUARTER: ☐ Fall ☐ Winter ☐ Spring ☐ Summer ; **YEAR** _____ **TOTAL # of STUDENTS** _____

OF EXAMS (TESTS) GIVEN FOR QUARTER: _____ ; **QUIZZES:** _____ ; **REPORTS:** _____

GRADE DISTRIBUTION

1. Number of students with "A" grade: _____ and % of total: _____ %
2. Number of students with "B" grade: _____ and % of total: _____ %
3. Number of students with "C" grade: _____ and % of total: _____ %
4. Number of students with "D" grade: _____ and % of total: _____ %
5. Number of students with "F" grade: _____ and % of total: _____ %

Student's Name: _____ ID #: _____ Course Grade: _____ %

Student's Name: _____ ID #: _____ Course Grade: _____ %

Student's Name: _____ ID #: _____ Course Grade: _____ %

Student's Name: _____ ID #: _____ Course Grade: _____ %

Student's Name: _____ ID #: _____ Course Grade: _____ %

6. Number of students WITH "I" GRADE: _____ **PLEASE SUBMIT MAKE-UP FORMS**

Student's Name: _____ ID #: _____

Student's Name: _____ ID #: _____

Student's Name: _____ ID #: _____

Student's Name: _____ ID #: _____

7. Number of students WITH "W" grade: _____ and % of total: _____ %

PLEASE SUBMIT THIS FORM, MAKE-UP FORM (IF ANY) AND STANDARD ITEM ANALYSIS REPORTS TO PROGRAM DIRECTOR OR ACADEMIC DEAN.

signature of faculty

date