

STONE CHILD COLLEGE

Grade Report

Fall ☐
 Spring ☐
 Summer ☐
 QUARTER 202__
 SEMESTER 202__

Higher Education Program ☐
 Adult Vocational Program ☐

Your current grades must be submitted to the program you were selected for, before or by __/__/__, or you may fax them to 406-395-5017.

Student: _____ StudentID#: _____
 Address: _____
 College: _____ Major: _____

STUDENTS: Enter the Course Number and Name of Course with the number of credits for each course that you are registered for.

INSTRUCTORS: Enter Current Letter Grade, % Classes Attended and sign.

Course #	Name of Course	Credits	Circle	Write-in Grade	% Classes Attended	Instructor Signature
			A B C D F I P			
			A B C D F I P			
			A B C D F I P			
			A B C D F I P			
			A B C D F I P			
			A B C D F I P			

TOTAL CREDITS: _____

Student Signature: _____ Date: _____

If you have any questions, contact the program at the following address:

Higher Education Program/Adult Vocational Training Program

Amanda Belcourt
 Scholarship Officer
 HEP/AVT/GRAD Programs
 8294 Upper Box Elder Road
 Box Elder, MT 59521
 PH: 406-395-4875 ext 1245