

Instructors Name:

Course:

Date:



**Student Feedback/Grade Sheet  
SUBJECT**

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_ **(MCCF)**

**WEEK #**

**Example:** Using Newspapers for Research 10/10 or N/A

**ASSIGNMENT 1:**

**ASSIGNMENT 2:**

**ASSIGNMENT 3:**

**FURTHER COMMENTS:**

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**CUMULATIVE CLASS GPA:**