

# Comprehensive Term Assessment Grade Sheet

Student Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

Class: \_\_\_\_\_

Term: \_\_\_\_\_

Instructor: \_\_\_\_\_

Date: \_\_\_\_\_

Subject / Component	Maximum Marks	Marks Obtained	Grade	Remarks
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
Total	_____	_____		

## General Comments:

\_\_\_\_\_  
Instructor Signature

\_\_\_\_\_  
Guardian Signature

\_\_\_\_\_  
Principal Signature