

Qualifying Paper Grade Report

Student: _____ Submission Date: _____

Paper Title:

Committee Chair (Print Name) _____

(Signature) _____

Committee Member (Print Name) _____

(Signature) _____

Please Circle Results:

Distinction

High Pass

Pass

Low Pass

Comments (If you require additional space, please attach a separate sheet, and be sure to include the student's name on the top of the additional page):

