

INTERCOLLEGIATE ATHLETICS DEPARTMENT
 CALIFORNIA STATE POLYTECHNIC UNIVERSITY, POMONA
GRADE CHECK FORM (Winter 2004)



Dear Professor:

Thank You for taking the time to complete this form. If no letter grade is available at this time **please provide comments** on *class participation, attendance/tardies* and an *overall assessment* of the students progress.

***Please fill in the information during your office hours.**

STUDENT-ATHLETE: _____ Head Coach Signature _____

SSN: _____ DUE DATE: _____ Sport _____

SUBJECT COURSE	UNITS	PROFESSOR	# OF ABS	GRADE	NEEDS TUTOR	SIGNATURE	COMMENTS

DUE in Academic Athletic Office by: Monday **FEBRUARY 16, 2004**

Revised: 10/03