



The Noah Webster Center

for Independent Studies

QUARTERLY GRADE SHEET

Student's Name _____
Address _____
City, ST Zip _____
Phone _____

Date _____
Grade _____
Cell Phone _____
Email _____

Parent/Teacher _____

Supervised Test Proctor _____

Quarter _____

| Subject | At Home | | | | | | | | | | | Avg | Quarterly Test Date | Test Grade |
|---------|-------------|--|--|--|--|--|--|--|--|--|--|-----|---------------------|------------|
| | Test Grades | | | | | | | | | | | | | |
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|----------------------|---|
| GRADING SCALE | |
| 90 – 100 | A |
| 80 – 89 | B |
| 70 – 79 | C |
| BELOW 70 | F |

Additional Comments:

Tests were conducted in compliance with the testing guidelines set forth by the Noah Webster Center for Independent Studies.

Parent/Teacher: _____
Signature

Proctor: _____
Signature