



GRADE REPORT FORM

Student's Name: _____

Instructions to the Student:

1. Fill in your name and thesis title.
2. Give a copy to your thesis/project director.

Title of Thesis/Project: _____

Instructions to Director:

1. Please check one of the following grade options.
2. Return the signed form to the JST Registrar, 1735 Le Roy, Berkeley, 94709.

- Pass** with No Revisions
 Pass with **Minor** Revisions
 Returned for **Major** Revisions*
 Does **Not** Pass

Print Director Name: _____

Signature: _____ Date: _____

*If the reader feels major revisions are necessary, s/he should contact the student and thesis director, and retain this grade sheet until satisfied that the thesis requires only minor revisions.

Comments (if any): **PLEASE INDICATE IF THESE ARE CONFIDENTIAL TO THE ASSOCIATE DEAN.** *[Use the reverse side of this page or separate sheet if necessary.]*