



SCANTRON GRADE SHEET PRINT REQUEST

Please create the scantron grade sheets as requested by the Primary Course Instructor for the index numbers listed below:

Index Number	Dept	Course	Section	Index Number	Dept	Course	Section
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____	_____

I understand that my department will be charged \$1.00 per course scantron to cover the cost of paper, printing, and processing.

Account to be charged: _____

Instructor Name: _____

(Please Print)

Instructor Signature: _____ Date: _____

Department Chair: _____ Date: _____

Return This form to the Office of Registration and Records.

Attn: Grade Clerk

Campus Box 8196

Pocatello, ID 83209-8196

For Office Use Only:

Processed By: _____ Date: _____