

Office Use Only

Financial Aid Office
PO Box 496006, Redding, CA 96049-6006
Phone: (530) 242-7650

Student: If you submit a progress report for a different student support program, you may submit that copy instead of using this form (Example: EOPS Progress Report.)

Instructors: Provide the current academic standing if your course. Please encourage the student to utilize all available resources for their success

STUDENT INFORMATION - REQUIRED:		
Student ID#:	Date of Birth:	
First Name:	Last Name:	M.I.

COURSE TITLE	UNITS	Current Grade (CIRCLE)	INSTRUCTOR SIGNATURE / DATE	INSTRUCTOR COMMENT AND ATTENDANCE STATUS
		A B C D F		
		A B C D F		
		A B C D F		
		A B C D F		
		A B C D F		
		A B C D F		

TERM		
<input type="checkbox"/> Fall _____	<input type="checkbox"/> Spring _____	<input type="checkbox"/> Summer _____

SIGNATURE REQUIRED	
Student Signature:	Date:

Please return form to the financial aid office room 139 or submit via email to: financialaid@shastacollege.edu