

DENVER BOUND SCHOLARS

MIDTERM REQUEST FORM

Student Name: _____

Student ID: _____

To the Instructor:

This student is enrolled at the University of Colorado Denver – Downtown Campus as a **Denver Bound (out of state merit) Scholar**. In accordance with the scholarship requirements a midterm grade report is requested. Please complete this form for the student as soon as possible. Thank you for your assistance.

Course Number	Course Name	Credit Hours	Midterm Grade	Instructor Signature	Date
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Please return by

Mary Francavilla
Assistant Director, Scholarship/Resource Office
University of Colorado Denver - Downtown Campus
mary.francavilla@ucdenver.edu
303-352-3608