Name:



Admission Number:



| Class: | Term: | | Year: | |
|-------------------------|------------|-------------------|-------------|----------------------|
| Position: / | Pos Last T | erm: / | Last Term M | - / - |
| Subject | Marks | Remarks | | Teacher Int. |
| Total | | | | |
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| Class Teacher Comments: | | | e: | gn: |
| Control Comments. | | | | gn. usan K. Nyiva |
| Head Teacher Comments: | | | | |
| | | | Si | gn: |
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| Closing Date: | | Next Term Begins: | | |