

Proctor Request Form

Please fill out this form to request a proctor. Please fill out the form completely.

The library is open for testing: Monday-Friday, 9:00am-5:00pm.



STUDENT'S RESPONSIBILITIES:

1. Complete Part I of the Proctor Request form completely.
2. Meet with the instructor and fill out Part II together; note exam date and time.
3. Have instructor fill out Part III of the form completely.
4. Ask instructor to sign the form. Student also signs the form.
5. Return the form to the library.
6. Arrive on time for the exam.
7. Bring all necessary materials to the exam.
8. Once the exam is finished, place the exam in the envelope.
9. Fill out the Proctor/Student Verification form.
10. Sign across the seal.

INSTRUCTOR'S RESPONSIBILITIES:

1. Fill out Part II and Part III of the Proctor Request form completely.
2. Provide an exam and supplementary materials to the library.

INSTRUCTOR'S AVAILABILITY:

Please note below your availability to answer student questions during the proctored exam.

- In person (I will be available on campus.)
- By phone Cell: Office:
- By email Email:

PART I

To be completed by student.

Student Name: <input type="text"/>	<input type="checkbox"/> Make up test
Student ID Number (optional): <input type="text"/>	<input type="checkbox"/> DSS Testing
Course: <input type="text"/>	Instructor's Name: <input type="text"/>
(For DSS students only.) I need to test in a private room outside of the library:	
If you choose yes, your test will be scheduled in an unused and available classroom on campus moderated by an assigned proctor. You will still check in for your exam at the library on the assigned date and time, and then will be escorted to the assigned classroom with your proctor.	
<input type="checkbox"/> Yes	
<input type="checkbox"/> No	

PART II

To be completed by student and instructor.

Total amount of time allotted for exam: <input type="text"/>	Course: <input type="text"/>		
Date: <input type="text"/>	Time: <input type="text"/>	Instructor Initial: <input type="text"/>	Student Initial: <input type="text"/>

PART III

To be completed by instructor.

Please note that if a student has a question during the proctored exam, or observes a possible error in the exam, and is unable to address it with you during the exam, the assigned proctor will take note of this. This will be communicated to you. DSS Office requests that you take these circumstances into consideration when grading the exam.

General test options (Check all that apply.)	
<input type="checkbox"/> Graphing Calculator	<input type="checkbox"/> Open Notes
<input type="checkbox"/> Scientific Calculator	<input type="checkbox"/> Note Card/Sheet
<input type="checkbox"/> Computer	<input type="checkbox"/> Interpreter/Helper
<input type="checkbox"/> Spell Checker	<input type="checkbox"/> Test materials in alternate format
<input type="checkbox"/> Open Book	<input type="checkbox"/> Extra time (please specify how much):
<input type="checkbox"/> Scratch Paper	<input type="checkbox"/> Other (please specify): <input type="text"/>
Comments: <input type="text"/>	

Instructor's Signature: Date:

Student's Signature: Date: