DSP&S Test Proctor Request Form



By Appointment Only:

Took Doko.	To at Time a.
Test Date:	Test Time:

Student Information (completed by student)

Student Name: Today's Date:

I.D. Number: Phone/Cell Number:

Instructor: Course: Test Description:

Actual day test given in class:

Exam Information (completed by Instructor)

Standard time allowed to complete the test (the time the entire class get) Scheduling of Exam

Student may not reschedule the test for another day or time.

Student <u>may</u> reschedule the test <u>time</u> but <u>may not</u> reschedule the <u>day.</u>

Student may reschedule the test time & day by this date: time:

Resources needed/allowed for exam

Please indicate what the student needs and/or is allowed to use for the test (check all that apply).

Do not mark on test Scantron: Calculator:

Textbook: Notes: Course Aides:

Other:

Instructor Information

Name: Course: Contact number

Email (if other than district):

Submit Form & Test To:

Save this form to your hard drive, then attach the saved copy (along with the test) to an email addressed to the CCC Test Center: testingservices@cloviscollege.edu

Exam & Test Proctor Request Form only returned via email at this time.

Exam Proctoring Information (completed by Test Center)

Time Allowed	Start Time	Stop Time	Proctor Initials

DSP&S Student's Approved Test Accommodations

Test Accommodations: Extended Time: 1.5x 2x

Calculator (4 function)

Scan & Read

Other:

Notes: