Testing Services and Programs

Test-Proctoring Form Request

(Submission required: sent via email or drop off)

To be completed by Instructor

Instructor Name:_____ Email:_____   Course: _____ Phone Number: _____   Student's Name: _____

Options for exam submission- Exams should be delivered at least **3 days** before the test date.

☐ I will send the exam via online Professor Exam Submission to: Register Now

☐ I will drop off the exam to Testing Services and Programs, Suite 202 or send via email (secure FTP only).

Options for collecting the Exam – TSP will not return exams via campus mail or by the student.

☐ I will pick up the exam: ☐ Please send back via Professor Exam Submission

Course & Exam Information

This class will take this exam (day/time): _____

This class will have this amount of time for exam: _____

An alternate exam date and time for requested student _____

This student should take this exam: ☐ At the requested time above ☐ Same time as class

The student is allowed to have the following auxiliary aids available during exam: (Please Provide details regarding approved auxiliary aids.

☐ Text Book   ☐ Course readings   ☐ Internet/Software: _____

☐ Calculator   ☐ Notes   ☐ Other: _____

☐ Does the student require extra time (Accommodation letter must be on file)?

☐ Does the student require an isolated room, a reader and/or scribe (Accommodation letter must be on file)?

Instructor's Signature: _____ Date: _____

(Please note that exam duration must not exceed Testing and Services Programs operation hours.)

If you have any questions, please do not hesitate to contact TSP at 302-857-6144 or via email testing@desu.edu.

Effective August 1, 2018