

# TESTING SERVICES REQUEST

Academic Success Center Use

Student Name	Faculty Phone #	END TIME
Faculty Name	Course #	
Test Type <small>(ASC Use)</small>		Scrap Paper

<p><b>Faculty:</b></p> <ul style="list-style-type: none"> <li>Present this form with the test to Academic Success Center (ASC) staff person. The test will be placed in a sealed envelope and the form will be attached on the outside of the envelope.</li> <li>Faculty/staff will pick up the test from the ASC.</li> </ul>
<p><b>Academic Success Center:</b></p> <ul style="list-style-type: none"> <li>The Academic Success Center will keep the test secure.</li> <li>When a test is completed, the instructor will receive an email notification.</li> </ul>
<p><b>Students:</b></p> <ul style="list-style-type: none"> <li>Students are responsible for scheduling an appointment to take a test.</li> <li>No exams will be returned to student.</li> <li>All notes will be collected and returned to instructor with the test.</li> <li>Student may not leave the testing room during the testing time for any reason.</li> <li>Students are prohibited from bringing the following into the test room unless authorized by instructor on this form: jackets, hats, backpacks, books, calculators, cell phones, laptops or any personal data devices.</li> <li>Any student discovered cheating on any test will have his or her ASC testing privileges revoked and will be reported to his or her instructor and to administration.</li> </ul>
<p><b>By signing this form, I understand and agree to the testing criteria.</b> Student Signature: _____</p>

**PLEASE CHECK THE APPROPRIATE BOX(ES) FOR ANY OPTION THAT MAY APPLY TO THIS TEST:**

- Open notes
- Open book
- Calculator allowed
- Graphing calculator allowed
- Dictionary allowed
- Computer-based exam
- Scantron exam
- Essay responses may be typed in MS Word
- Test Reader program required   
(Please include copy of test on flash drive)

**Deadline for test to be administered:**

**\*Time allotted for exam:**

\* Please note that if marked "Unlimited" student will be allotted 4 hours unless otherwise indicated.

**Other Instructions:**

**For Academic Success Center Use**

	<b>Day</b>	<b>Date</b>	<b>Time Started</b>	<b>Time Ended</b>	<b>Total Time</b>
Test Administered					

Test Proctor

	Day	Date	Time	How
Instructor Authorized Test				
Instructor Delivered Test				
Instructor Picked-Up Test				Initial
<b>Email sent to instructor</b>				



Faculty Signature \_\_\_\_\_

ASC Staff Signature \_\_\_\_\_

Test Not Taken: