

Please administer the attached examination to:

Student's Name

Campus: _____

TEST DATE: _____ TEST TIME: _____

Instructor: _____

Contact Phone #: _____

Course Title/Section #: _____

Title of Test Requested: _____

Amount of time the class is given:

Please review and select additional instructions (notes, open book, calculator, etc.):

<input type="checkbox"/> Open Book	<input type="checkbox"/> Computer
<input type="checkbox"/> Open Notes	<input type="checkbox"/> Calculator
<input type="checkbox"/> Note Card - Size: _____	<input type="checkbox"/> Scantron
<input type="checkbox"/> Scratch paper	<input type="checkbox"/> Bluebook / Greenbook
<input type="checkbox"/> Online Test	<input type="checkbox"/> Dictionary/Thesaurus
<input type="checkbox"/> Password:	<input type="checkbox"/> Scan and Email Completed Exam
Other: _____	

If the student does not make arrangements to take the exam, please return by ___/___/___

Please Note:

DSPS will place your students completed exam in your intercampus mailbox by the end of the day (5:00pm)

- ❖ If you don't have an intercampus mailbox, you are able to pick up the completed exam in the DSPS office anytime Mon-Thurs 8:00am-5:00pm and Friday 8:00am-12:00pm.

DSPS STAFF USE ONLY	
Start Time:	Stop Time:
Extended Time: N/A 1.5x 2.0x Other: _____	Not To Exceed Time:
Comments:	