Proctored Test Request Form

Please submit this form to <u>Disability Resources in Room 103 on the Lone Tree campus</u> at <u>least</u> <u>3 business days</u> before the date of the test. The test cannot be guaranteed unless you submit this form prior to one of these locations.

ALL PROCTORED TESTING MUST BE COMPLETED BY 5PM. IF YOU SHOW UP LATE FOR YOUR SCHEDULED TESTING TIME, YOUR TIME WILL BE DEDUCTED ACCORDINGLY.

SCHEDULED TESTING TIME, YOUR TIME WILL BE DEDUCTED ACCORDINGLY.
Your Full name:
Your Email Address:
Course name:
Instructor's Name:
Date class takes test/quiz: (MM/DD/YYYY)
Time class takes test/quiz: (HH:MM)
Proctored test/quiz date (MM/DD/YYYY)
Proctored test/quiz time: (HH:MM)
Additional accommodations needed for this test: