



**Test Proctoring Form  
(Extended Time / Testing in Private / Test Reading)**

**STUDENT INFORMATION**

Student's Name: \_\_\_\_\_ B#: B

I have been provided a copy of all Accessibility Services policies and have been given the opportunity to ask questions. I agree to comply with all Accessibility Services policies and procedures. I understand that any violation of these policies may result in loss of accommodations. I understand that cheating will not be tolerated and I agree to uphold the academic dishonesty policy. Should I be found guilty of breaking the academic dishonesty policy, I understand immediate action will be taken by the Office of Accessibility Services.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**FACULTY INFORMATION** – *please see the back of this form for more information*

Instructor's Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

CRN / Course / Section: \_\_\_\_\_

Total time allowed for exam (excluding extended time): \_\_\_\_\_

Date and time student will take exam: \_\_\_\_\_

INITIAL all allowable instruments / alternative format / accommodations:

- |                  |                     |                     |
|------------------|---------------------|---------------------|
| _____ None       | _____ Open Notes    | _____ Interpreter   |
| _____ Calculator | _____ Scratch Paper | _____ Tape Recorder |
| _____ Computer   | _____ Test Reader   | _____ Open Book     |

Other / Special Instructions (please explain): \_\_\_\_\_

**Exam Delivery Info:** (check one)

\_\_\_\_\_ Test will be hand delivered to Accessibility Services 032 by 12:00 noon the day before test

\_\_\_\_\_ Test will be emailed to disabilityservices@bridgevalley.edu by 12:00 noon the day before test

\_\_\_\_\_ Student will bring the exam with them in a sealed envelope

\_\_\_\_\_ Exam is on Blackboard; password is \_\_\_\_\_

**Exam Return:** (check one)

\_\_\_\_\_ Instructor will pick up completed exam next business day from Accessibility Services

\_\_\_\_\_ Completed test returned the following business day by proctor to \_\_\_\_\_  
Office location / include room #

\_\_\_\_\_ No Need to return; computer handles exam

Accessibility Services Only:

Time Started: \_\_\_\_\_ Staff Initials: \_\_\_\_\_ End Started: \_\_\_\_\_ Staff Initials: \_\_\_\_\_

## **Guidelines and Procedures:**

The goal of Accessibility Services is to assist faculty in providing testing accommodations for students with disabilities. There is a testing room set aside for testing of students with disabilities within the Office of Student Services. Students are held to the same standard as they would be in the classroom and are monitored closely in order to ensure academic integrity.

**Hours:** Monday-Thursday 7:30am-4pm  
Friday: 7:30am-4pm

\*\*\* Other hours will be accommodated for evening and Saturday classes.

### **STUDENT RESPONSIBILITIES**

- Complete the Test Proctoring form with the faculty member.
- Present the completed Test Proctoring form to your instructor as soon as you know you will need testing accommodations.
- Discuss your needs with your instructor.
- All Test Proctoring request must be submitted to Accessibility Services at least 24 hours prior to the testing date and time. The earlier the form is submitted the better.
- You must show ID prior to taking an exam.
- Must abide by all Testing Policies and Procedures, including academic dishonesty.
- Must be on time for the exam.

### **FACULTY RESPONSIBILITIES**

- Discuss with the student specific test proctoring / accommodation needs and plans.
- Complete the Test Proctoring form with the student.
- Submit the completed Test Proctoring form to the Assistant Director of Accessibility Services within the Division of Student Services at least 24 hours in advance. The earlier the better.
- Remind the student of the test date and time.
- Hand deliver/email the test with the completed Test Proctoring form to Accessibility Services. If you choose to have the student bring the test in an envelope, please note that on the Test Proctoring form.