TESTING REQUEST FORM

Proctoring Service Request Form for ADAPTED (DSP&S) Tests

Once a student has provided you with a copy of their accommodations, please complete this form. *Please submit the form as soon as possible, even if the exam is not yet ready. Once the exam is ready, it may be emailed or hand delivered. All requests must be received by 8:30am to ensure same day processing. Testing request forms and exams may be emailed to testingcenter@citruscollege.edu or delivered to the front desk in ED 113.

*Please note if a student's accommodations include alternate media such as enlarged font or Braille, the test must be emailed or delivered to Laks Floriano (Ifloriano@citruscollege.edu) in the DSP&S office no later than one week in advance of the opening date. Alternate media accommodations are listed on the student's accommodation **Directions:** Please fill out this form completely. If you have any questions, please call 626-914-8570 or stop by ED113. **Course Name and Number** (Ex. Bio 105): **Instructor Name:** Phone #: **Email:** Name of DSPS Student(s): If multiple students in this course are taking the same test with the same parameters, you can list all of their names here. You do not have to do a separate form for each student. It is important to include the student's full name, as written in Wingspan. **Opening Date: Closing Date:** Students are required to begin the test at the same time as the rest of the class. Students may take the test outside of class time only with your approval. Name/Number of Test (Ex. Test 3): Exact Name of Test on Canvas: Mode of Exam: ☐ Paper ☐ Canvas If applicable, password on Canvas: **Student MUST have:** ☐ Scantron ☐ Bluebook ☐ Other: **Student may use:** ☐ Graphing calculator ☐ Scientific calculator ☐ 4-Function calculator ☐ Dictionary ☐ Scratch paper □ Notes □ Textbook □ Computer □ Index card, size:_____ **Additional Test Instructions:** Any additional information not already on exam will go here. This could include information for the student or for our staff. **Allotted Time:** Hours: Minutes: Please indicate how much time you are allowing for this test/quiz in class. Our office will calculate the accommodated time. *Unlimited time can only be given if the rest of the class also has unlimited time.* When Test is Completed: ☐ Hold for Me ☐ Student to Carry ☐ Send I/O Mail