

Proctored Testing Request Form

Course Title:

Instructor's Name:

Exam Title:

Exam Date/Dates:

Testing Site: ITC 107

Special Instructions: (i.e. open book, closed book, use of calculators or notes, etc.)

Student Name	Student Signature	Photo ID Check (Campus ID Card or Drivers License)	Date	Time In	Time Out	Proctor Initials
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