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| **SECTION 1: FACULTY INFORMATION** |
| **Name**: | **Emergency Contact #**: | **Date**: |
| **SECTION 2: STUDENT INFORMATION** |
| **Course**:**Section**: **Class time**:**Exam**: [ ] Makeup [ ] Disability Access Services [ ] Online/Blended | **Exam(s) may be administered to:**[ ] Individual student(s) only[ ] Any of my students | **Student Name(s)**For entire class, please provide roster:  |
| **SECTION 3: PROCTORING CONDITIONS** |
| **Normal time allowed for exam**(we will adjust extended time):[ ] 50 minutes[ ] 1 hour[ ] 75 minutes[ ] 90 minutes[ ] 2 hours[ ] Other:  | **Exam date(s) of availability**: **If not taken by end date, student must contact me for permission to reschedule**:[ ] Yes [ ] No | **Permitted supplemental aids**:[ ] None[ ] Notes[ ] Textbook[ ] Other:**The Testing Center should**:[ ] Collect aids and return to faculty[ ] Collect aids and shred[ ] Allow student to keep aids | **Calculator**:[ ] None[ ] Any[ ] Basic 4-function[ ] Scientific[ ] Graphing[ ] Other:  |
| **Any other special instructions**:  |
| **SECTION 4: RETURN INSTRUCTIONS** (Please select **one**) |
| [ ] **Hold for pick up**[ ] I will pick up exam(s)[ ] Designated individual will pick up exam(s): | [ ] **Campus mail**:  | [ ] **PDF scan to UMSL email**  | [ ] **N/A – Online**  |