

**MAKE-UP EXAM PROCTORING FORM: Testing Services**  
*Form to be submitted with Exam*

***To be completed by the Student:***

Student: \_\_\_\_\_ Class: \_\_\_\_\_

Instructor: \_\_\_\_\_

Date and time class takes the exam: \_\_\_\_\_

***To be completed by the Professor:***

I, the undersigned Professor, give my permission to the following:

1. All students taking this exam are allowed: (Check all that apply)

- |   |  |                                |
|---|--|--------------------------------|
| <input type="checkbox"/> Calculator   | <input type="checkbox"/> Dictionary    | <input type="checkbox"/> Notes |
| <input type="checkbox"/> Textbook   | <input type="checkbox"/> Scratch Paper | <input type="checkbox"/> Bible |
| <input type="checkbox"/> Bathroom breaks [Time stops <input type="checkbox"/> Time Continues <input type="checkbox"/> |  |                                |

Other \_\_\_\_\_

2. Duration of exam: \_\_\_\_\_

Additional Notes: \_\_\_\_\_

\_\_\_\_\_  
Professor's Signature

\_\_\_\_\_  
Date

***Handling of Exam:***

\_\_\_\_\_  
Exam Received By:

\_\_\_\_\_  
Method of Delivery

\_\_\_\_\_  
Exam Time Start

\_\_\_\_\_  
Exam Time Finished

\_\_\_\_\_  
Proctor Signature

\_\_\_\_\_  
Date Exam Picked Up

\_\_\_\_\_  
Professor or Designee