**Test Proctoring Form**

# **Disability Resource Center**

<http://www.bellevuecollege.edu/drc>

drc@bellevuecollege.edu

Main Campus, B132

Phone: 425-564-2498

Fax: 425-564-4138

TTY: 425-564-4110

Skype for ASL: DRCatBC

# **Student Section**

**Step 1**: fill out the Student Section and provide this sheet to your instructor 2 weekdays before the test is scheduled in class. *Reminder:* if you have a notecard accommodation, provide the notecard as well.

**Step 2**: contact the DRC 2 weekdays before the test is scheduled to set up a Test Appointment (this form does not count). *Reminder:* if you need Kurzweil, Dragon, a scribe, or a computer for your test, include this info when making a Test Appointment. **Final Exams** require Test Appointments be made 4 weeks in advance.

Today’s Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Class Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Instructor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Class Date and Time for Test: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Alternative Test Appointment Date and Time (if different): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you would like to schedule a test in the DRC *after* the date and time the test is scheduled for class, Instructor permission is required.

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Remember **Step 2**: contact the DRC 2 weekdays before the test is scheduled to set up a Test Appointment (this form does not count).

# **Instructor Section**

Fill out the Instructor Section and deliver this form, along with the test, to the DRC by 8AM the day the student is scheduled to take the test. The term ‘test’ refers to any test, exam or quiz.

 ⮚ Would you like the DRC to copy these Test Instructions to a MyDRC Test Proctoring Form for use by all DRC students in this course for the rest of the quarter? [ ]  Yes [ ]  No

# *Test Instructions*

Open Book: [ ]  Yes [ ]  No Scantron required: [ ]  Yes [ ]  No

Open Note: [ ]  Yes [ ]  No Blue Book required: [ ]  Yes [ ]  No

Calculator: [ ]  Yes [ ]  No

Total test time given to class: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Test must be completed no later than (if applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other instructions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Returning the Test Preference*

I will pick up at the DRC: [ ]  Yes [ ]  No

Campus Mail to Room: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Scan and Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

All tests returned via Campus Mail will also be scanned to safeguard against accidental loss or damage.

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

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