Allen College
Test Proctoring Form

Instructor Name: ________________________________________________________________

Course Name & Number: _________________________________________________________

Student Name: _______________________________________________________________

Time Limit: __________________________________________________________________

Date Student Must Complete By: _________________________________________________

Open Books/Open Notes Yes _________ No _________

Testing Tools Allowed: ___ None  ___ Calculator  ___ Open Notes  ___ Books

___ Dictionary  ___ Scratch Paper  ___ Computer

___ Highlight Pen  ___ Other

Special Instructions: ____________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

____________________________________________________________________________

Please instruct students to bring pencil/pen, calculator, and any other materials they may need to complete the test.

**LIBRARY STAFF IS NOT RESPONSIBLE FOR STUDENT PURSES, BACKPACKS, OR OTHER PERSONAL BELONGINGS.**

Date and time student contacted library staff to arrange for testing:

Date: ____________________ Time: ____________________

Date and time scheduled for testing: ____________________

Signature of library staff member contacted by student: ____________________

To be completed by proctor on date of test:

<table>
<thead>
<tr>
<th>DATE &amp; TIME TEST PROCTORED:</th>
<th></th>
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</thead>
<tbody>
<tr>
<td>PROCTOR’S SIGNATURE:</td>
<td></td>
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