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Proctored By: Date Taken: Start Time End Time

Testing Proctor Use Only

(First)

(First)

(Last)

(Name)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Student Name: |   |   |  |  |
| Faculty Name:(Last) |   |   | Office Number: |   |
| Course:(Number) |   |   |  |  |
| Test/Quiz # or Name: |   |  |  |
| Date Given: |   |  |  |  |
| Date Expired: |   | *If no expiration date, test will remain in Testing* *through the final week of classes.* |  |  |

**Restrictions:** Indicate all listed in addition to any you might have.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Time:** |  | **Format:** |  | **Materials Permitted:** |  | **Special Instructions:** |
|    | ***If no time listed 50 minutes default*** | [ ]  | No GradeMaster | [ ]  | Writing Instrument Only |   |
| [ ]  | Time Allowed | [ ]  | GradeMaster | [ ]  | Calculator |
|  |   |  |  | [ ]  | Open Book/Notes |
|  |  |  |  | [ ]  | Scrap Paper (Return with Test) |
|  |  |  |  | [ ]  | Other (Please Specify) |
|   |  |  |  |  |  |  |
|  |  |  |  |  |   |  |

Testing

Academic Resource Center

Faculty: Please complete and attach **one form per test for each student.** All tests will be returned to your credenza.

Questions? Contact arctesting@bju.edu or ext. 8200

Attach test and submit to Academic Resource Center Testing, Alumni 206.