

Final Exam Change Form

Proctored By:

Date Taken:

Start Time:

Actual End Time:

Testing Proctor Use Only

Student Name:

Faculty Name:

Office Number:

Course:

Test/Quiz # or Name:

Final Exam

Date:

A specific date and time must be filled in and student must take exam at this time..

Time:

Registrar's Office

Approval

Stamp or Signature

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

Time:

Time Allowed

70

Format:

No GradeMaster

GradeMaster

Materials Permitted:

Writing Instrument Only

Calculator

Open Book/Notes

Scrap Paper (Return with Test)

Other (Please Specify)

Special Instructions:

Academic Resource Center

Testing

Faculty: Please complete and attach **one form per test for each student.**

Questions? Contact arctesting@bju.edu or Amy Streeeter ext. 8202

Attach test and submit to Academic Resource Center Testing, Alumni 208.