

## Testing Center Request for Student to Take a Test

This request form **is to be completed by the instructor and returned to the Testing Center** with all test materials. If you have any questions, please feel free to contact the Testing Center for assistance, 419-434-5122 or 419-434-5532.

Please remind the student that it is the **student's responsibility to make an appointment** in the Testing Center at least one (1) business day in advance. **Student must present a photo ID before taking the test.**

### INSTRUCTOR IS TO COMPLETE THIS SECTION

\_\_\_\_\_  
Student's Name

\_\_\_\_\_  
Course Name and Section Number

\_\_\_\_\_  
Instructor's Name

\_\_\_\_\_  
Instructor's Phone Number

**Last date allowed** to take test: \_\_\_\_/\_\_\_\_/\_\_\_\_ (Please Specify)

Students in the classroom will be allowed \_\_\_\_ Hour \_\_\_\_ Minutes. **(Required Information)**

**Appropriate accommodations will be made for those students registered with the Office of Disability Services (ODS). Only those students with an acceptable, documented disability will be allowed extended time. If you suspect that a student has a disability, please refer them to ODS.**

What item(s) is the student allowed to use? **(Please specify. The student will not be allowed to have anything but the test unless noted.)**

\_\_\_ Pens/Pencils

\_\_\_ Text Book

\_\_\_ Notes

\_\_\_ Computer

\_\_\_ Calculator

\_\_\_ Scratch Paper

\_\_\_ Other \_\_\_\_\_

**Method of return to instructor** \*If not indicated, test will be held in the Testing Center for pick-up. **Delivery is not provided.**

\_\_\_ Instructor will pick up test

\_\_\_ Interoffice Mail – (not recommended)

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

### Testing Center Use Only

Date  
Received \_\_\_\_/\_\_\_\_/\_\_\_\_  
Logged in  
by: \_\_\_\_\_

<p>___ Tester provided a valid ID. ID# _____ I have read and understand the Testing Center Rules.  _____ Signature of Test Taker</p>
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Date  
Taken \_\_\_\_/\_\_\_\_/\_\_\_\_  
Start Time: \_\_\_\_ am/pm  
Finish Time: \_\_\_\_ am/pm  
Room # \_\_\_\_\_  
Accommodation \_\_\_\_\_  
\_\_\_\_\_  
Monitor \_\_\_\_\_

Date  
Returned \_\_\_\_/\_\_\_\_/\_\_\_\_  
\_\_\_\_ Picked up  
\_\_\_\_ Mailed  
Logged out  
by: \_\_\_\_\_