TESTING SERVICES REQUEST
REQUIRED INFORMATION FROM FACULTY

Student Name	Best Contact #	END TIME
Faculty Name	Course #	
Test Type		ALLOTTED TIME

Faculty:
- Present this form with the test to Academic Success Center (ASC) staff person. The test will be placed in a sealed envelope and the form will be attached on the outside of the envelope.
- Faculty/staff will pick up the test from the ASC.

Academic Success Center:
- The Academic Success Center will keep the test secure.
- When a test is completed, the instructor will receive an email notification.

Students:
- Student is responsible for scheduling an appointment to take a test.
- No exams will be returned to student.
- All notes will be collected and returned to instructor with the test.
- Student may not leave the testing room during the testing time for any reason.
- Student is prohibited from bringing the following into the test room unless authorized by instructor on this form: jackets, hats, backpacks, books, calculators, cell phones, laptops, or any personal data devices.
- Any student discovered cheating on any test will have his or her ASC testing privileges revoked and will be reported to his or her instructor and to administration.

By signing this form, I understand and agree to the testing criteria.

Student Signature: _____

PLEASE CHECK THE APPROPRIATE BOX(ES) FOR ANY OPTION THAT APPLIES TO THIS STUDENT ON THIS TEST:

Open notes

Open book

Basic calculator allowed

Scientific calculator allowed

Graphing calculator allowed

Computer-based test

Scantron test

Essay responses may be typed in MS Word

Screen reader program (please include MS Word copy of test)

Scribe

Deadline for test to be taken:

If extended by instructor (ASC use):

*Standard time allotted for test:

Extended time?	None	x1.5	x2

* If standard time is marked "unlimited", student will be allotted 4 hours.

Other Instructions (Access Code, dictionary use, etc.):

For Academic Success Center Use

Test Administered	Day	Date		Time Started	Time Ended	Total Time

Test Proctor	

	Day	Date	Time	How
Instructor Authorized Test				
Email Sent to Instructor				
Instructor Picked Up Test				

ASC
ACADEMIC SUCCESS CENTER
LOURDES UNIVERSITY
Sister Cabrini Warpeha

Faculty Signature _____

ASC Staff Signature _____

Test Not Taken: ☐