



ACADEMIC SUPPORT CENTER

Instructors: *Please complete the following form so that the ASC can properly administer the attached exam to your students.*

Instructor's Name: _____	Dept. & Course No. _____
Test Title: _____	# of Test-takers _____
Exam Closing Date & Time: _____	Campus Ext. #: _____
Test Time Allowed: ____ hrs ____ min* (*ASC calculates extended time for DSPS students)	

Names of students with approved DSPS accommodations taking the exam:

(Please write names here or attach a separate list.)

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

Names of students with instructor permission taking the make-up exam:

(Please write names here or attach a separate list.)

- | | |
|----------|----------|
| 1. _____ | 5. _____ |
| 2. _____ | 6. _____ |
| 3. _____ | 7. _____ |
| 4. _____ | 8. _____ |

X Please Check Appropriate Boxes

YES NO

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Mark answers on test. |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Use scantron. |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Use blue book or separate sheet of paper. |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Use of scratch paper is allowed. |
| <input type="checkbox"/> | <input type="checkbox"/> | 5. Dictionary and/or Thesaurus OK*. (*Typically for ESOL students.) |
| <input type="checkbox"/> | <input type="checkbox"/> | 6. Open-book test*. (*Title of book(s)?) _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | 7. Notes OK*. (*3X5 card, all class notes, et cetera?) _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | 8. May take a break during test. |
| <input type="checkbox"/> | <input type="checkbox"/> | 9. Calculator OK. _____ |
| <input type="checkbox"/> | <input type="checkbox"/> | 10. Additional Instructions: _____ |

INDICATE EXAM RETRIEVAL

- Instructor will retrieve test from ASC. (Exams filed in instructor's folder for pick-up.)
- ASC will deliver test (Tues/Thurs) via inter-office mail to: _____ Dept./Div./Bldg.

Rec'd By: _____

Date/Time: _____