

Testing Protocol Exam Information Form

This form should be completed by the instructor and returned to <u>Accessibility Services</u> prior to the test date.

Student:	Course:	Instructor:
Testing Date(s):	Testing Time:	
Amount of time allowed for class exa	m including accommodation time	:
The students may use the followi	ng materials during testing (ch	eck all that apply)
☐ Calculator	☐ Textbook	☐ Class Notes
☐ Dictionary	\Box Graphs	☐ Lab Book
☐ Thesaurus	☐ Formula Sheet	☐ Other
Students will Record answers on	(check one)	
☐ Test Copy	☐ Scantron	☐ Answer Sheet
Instructor would like to (check on	e)	
☐ Pick Up Completed Exam	☐ Receive Scanned Copy of Completed Exam by Email	
Instructors may pick up the complet	ed exam at the Wynn 10-209 fror	nt desk.
paper, or other). The Accessibility So	ervices office will only collect wh	al(s) that needs to be returned (i.e. notes, scratch at the student places in the return envelope.
	For Accessibility Services to	
If you have questions about testing acc	commodations please contact Access	sibility Services at accessibilityservices@durhatech.edu
Administrator:	Appointment Time:	Appointment Date:
Arrival Time:	Begin Test Time:	End Test Time: