PROCTOR REQUEST FORM
For Bronx, Manhattan, or Yorktown Campus
(Dobbs Ferry has separate form)

INSTRUCTIONS

TO THE
STUDENT: It is your responsibility to provide this form to your professor and submit the completed form to the appropriate campus office. ACCESS requires at least seven days advanced notice to schedule a test. If you have questions, please contact ACCESSibility, (914) 674-7523/7284.

TO THE INSTRUCTOR: It is the student’s responsibility to submit this form to you for completion. The student should submit the completed form to the appropriate campus office. It is your responsibility to provide the blank exam and retrieve the completed exam to the appropriate campus office.

Campus Contact & Offices for Testing:

<table>
<thead>
<tr>
<th>Campus</th>
<th>Contact Email</th>
<th>Testing Location</th>
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<tbody>
<tr>
<td>Manhattan</td>
<td><a href="mailto:sjohnston@mercy.edu">sjohnston@mercy.edu</a>, Shante Johnston</td>
<td>Testing Location: Manhattan Office of Student Services</td>
</tr>
<tr>
<td>Bronx</td>
<td><a href="mailto:accessibility@mercy.edu">accessibility@mercy.edu</a></td>
<td>Testing Location: Bronx Campus, Room 2150</td>
</tr>
<tr>
<td>Yorktown Heights</td>
<td><a href="mailto:lfritz@mercy.edu">lfritz@mercy.edu</a>, Liz Fritz</td>
<td>Testing Location: YH Learning Library Commons</td>
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</tbody>
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SECTION 1: BASIC INFORMATION

INSTRUCTOR’S NAME | INSTRUCTOR’S EMAIL

INSTRUCTOR’S PHONE # | COURSE

STUDENT’S NAME | STUDENT’S CWID

SECTION 2: DATES AND TIMES

Bronx Campus: 9am-5pm M-F; Some evenings available, Manhattan Campus: 9am-7pm M-F, Yorktown Heights Campus: 9am-5pm M-F

Due to these limited hours, it may be necessary to arrange testing for this student at an alternative date/time than the regularly scheduled class exam time. If the exam is proctored at an alternative date and/or time, please indicate below the latest date the student can take the exam.

<table>
<thead>
<tr>
<th>IN-CLASS EXAM DATE</th>
<th>IN-CLASS EXAM START TIME</th>
<th>TIME ALLOWED FOR EXAM DURING REGULAR CLASS</th>
<th>PROCTORED EXAM MUST BE COMPLETED BY MM/DD/YYYY</th>
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ADDITIONAL EXAM INFORMATION: Students testing in the classroom are permitted use of the following items (example: dictionary, calculator, etc.):

SECTION 3: EXAM DELIVERY/RETURN

EXAM DELIVERY TO PROCTOR

Specify exam delivery method to appropriate testing office (see below)

☐ I will send the exam via email to campus contact (see Instructions section for campus contact information)

☐ I, my designee or the student (circle one), will hand deliver the exam in a sealed envelope to campus contact (see Instructions section for campus contact information).

COMPLETED EXAM RETURN TO PROFESSOR

Specify how you would like the exam returned to you:

☐ I want the exam sent:

  By interoffice mail to: ____________________________

  By email to: ____________________________

☐ I want the student to hand deliver the exam to me in a sealed envelope to this room: ____________________________