

Exam Type: \_\_\_\_ Internet \_\_\_\_ Make-up Exam \_\_\_\_ VCT Exam \_\_\_\_ Correspondence \$12

Other Exam (please explain) \_\_\_\_\_

Instructor Signature \_\_\_\_\_

Course Name:	Instructor:
Date Delivered:	Test Number:
Special Instructions: <u>Range of Dates: / / to: / /</u> <u>Time limit on test: _____</u> Materials allowed: _____ Accommodations: _____ Password: _____	
Test Roster included: <input type="checkbox"/> Yes <input type="checkbox"/> No	

**Please read the following statement and acknowledge your understanding by signing below:  
If the test administrator determines an examinee is engaging in any prohibited behavior, that observation will be reported to their instructor. Students may not access the Internet for any reason other than logging onto their exam through Blackboard.**

Student's Name	Date Test Administered	Scantron or Test Copy or Receipt #	Student's Signature	Instructor's Signature	Date of Pick-up
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**Please read the following statement and acknowledge your understanding by signing below:**  
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