## Student Information

To receive special testing accommodations with Testing Services:
1. Call Testing Services at 651-2836 to make an appointment.
2. Complete this part of the form and give it to your instructor.

<table>
<thead>
<tr>
<th>Student Name</th>
<th>Appointment Date</th>
<th>Appointment Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student ID # 50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Course Number</td>
<td>Class Length</td>
<td></td>
</tr>
<tr>
<td></td>
<td>50 min. 75 min. Other:</td>
<td></td>
</tr>
</tbody>
</table>

## Instructor Information

Please complete the following information and return this form with the test to Testing Services.

<table>
<thead>
<tr>
<th>Instructor Name</th>
<th>Ext.</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Test Time Allowed for all Students (If different from normal class time)

Return Test Via:
- Campus Mail, MS
- *Fax to
- Call for Pickup, Ext

Student is allowed to use:
- ☐ Calculator
- ☐ Notes
- ☐ Books
- Other

Comments/Instructions:

*Testing Services will keep the completed test until the end of the semester, unless otherwise specified.

## Completed by Testing Services

Date Test Received

Authorized Accommodations

- ☐ Extended Time: 1.5 2.0 2.5 Other
- ☐ Solitary Environment
- ☐ Reader
- ☐ Scribe
- ☐ Computer/Word Processor
- ☐ Use of Calculator
- ☐ Other

Total Time: Stop:

<table>
<thead>
<tr>
<th>Actual Start Time</th>
<th>Actual Stop Time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Instructions Read to Student:
- ☐ Yes, By: __________________________
- ☐ No

Comments: __________________________

Test Returned: Date: By: __________________________

Called for Pickup: __________________________

Retrieved By: __________________________ Date: __________________________