

MAKE-UP EXAM AND PROCTOR REQUEST FORM

INSTRUCTORS: Please complete this form for each individual or group exam. The History Help Center cannot administer any exam without this form.

Instructor: _____ Today's Date: _____

Course Number: _____

Student(s) Names: _____

CHOOSE FROM THE FOLLOWING:

Make-Up Exam: Date: _____ Time Allowed: _____

Extra Exam Time Date: _____ Time Allowed: _____

Proctor Request Date: _____ Time: _____

Building: _____ Room # _____

Proctor(s) Assigned: _____

Materials Needed: Scantron Blue/Green Book Other: _____

Students May Use: Notes Other Aides _____

Special Instructions: _____
