

ISU- Meridian

Testing Services Center (TSC) 208-373-1960 meridiantesting@isu.edu

Instructor: Please email this completed form to the TSC

| Educational Institution or ISU Department : | | Course Title : | | | |
|--|--|------------------------|-------------------|-------------|-------------------|
| Today's Date: | Exam: | | Exam Type: | Paper | Online* |
| *Instructor: Please se | end any proctor passwords to | o meridiantesting@isu. | edu at least 48 l | nours befor | re the exam time. |
| Student may test: | | | | _ Time Lir | nit:min |
| Student Name**: | | Instructor Nam | e: | | |
| Student Email: | | Instructor Email: | | | |
| Instructor's Mailing Add | lress (if applicable): [‡] | | | | |
| | ponsibility to: <u>sting@isu.edu</u> , call 208-373- kam appointment <i>after</i> the in | | | st.com/isu, | /Exam/List |

2. Inform the instructor of the student's scheduled exam date and time.

PROCTORING INSTRUCTIONS

| Answers should be placed on | **If requesting the same exam for multiple students, | | |
|---|--|--|--|
| Test Itself | please enter additional names and emails here.** | | |
| Answer Sheet Provided by Instructor | | | |
| Other (Specify): | | | |
| Testing Aids Allowed | | | |
| Calculator | | | |
| Dictionary | | | |
| Notes/Open Book (Textbook Title): | | | |
| Scratch paper just shred it se | end it back, along with the exam, as instructed below. | | |
| Other (Specify): | | | |
| No Yes (Instructions Required | DT staffed to monitor breaks outside of the TSC (i.e. restrooms breaks).): | | |
| Instructions after exam completion (REQUIRE | D): | | |
| Email a scanned copy and mail the origin | nal to the mailing address given above. [‡] | | |
| Email a scanned copy and keep the origi | nal on file until, then shred the original | | |
| Other/Additional: | | | |
| | | | |