



Exams and Accommodations Form

Instructor: _____ Instructor's Phone: _____

Instructor's Email address: _____ Student Email: _____

Course: _____ Name of Test: _____

Completion of Test:

- Pick-up by instructor
- E-mail to instructor (will be shredded after e-mailed)

Materials Allowed for Test (please circle):

3x5 Card- Qty: ____ YES NO
 Notes YES NO
 Books YES NO
 Standard Calculator YES NO
 Scratch Paper YES NO
 Other Materials: _____

Time Limit: _____

For online tests:

Website: _____

Password: _____

Name of Student _____ Accommodations (Y/N)

1.	
2.	
3.	
4.	

Instructor Signature: _____ Date: _____

Student Signature: _____ Date: _____

Accepted: _____ Date: _____ Exam Returned: _____