Academic Center for Excellence
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NHTI ACE
Proctored Test Administration Form

Step 1: Please select one.

◯ ACCESSIBILITY SERVICES ◯ MAKE-UP TEST ◯ ELL/ESOL

Step 2: Please enter all information.

Student Name: _____ Student ID#: _____

Instructor's Name: _____ Course: _____

Date test to be taken by: _____ Time Allowed*: _____

*please enter time as total time after accommodation/ELL recommendation, if applicable.

Step 3: Please select all that apply.

The test will be CLOSED BOOK and CLOSED NOTES unless specified below.

☐ Calculator ☐ Textbook ☐ Dictionary

☐ Formula Sheet ☐ Class Notes & Handouts ☐ Clarifying Questions (ELL/ESOL only)

☐ Lockdown/Respondus

☐ Other _____

Step 4: Please select one.

Test is Canvas/Lockdown/Respondus ☐

Instructor will pick up in ACE on: _____

Scan and email test to: _____

Other arrangements have been made. Please specify: _____

_____

Date Test Taken: _____ Time In: _____

ACE Staff Initials: _____ Time Out: _____