

University of West Florida
Proctor Approval Application

Section A. To be completed by the student.

1. Student Contact Information:

Name _____ Area Code – Daytime phone number _____
 Your UWF Email address _____ Area Code – Evening phone number _____

2. Course Number(s) and Instructor(s)

3. Semester and Year

Summer 200__
 Fall 200__
 Spring 200__

4. The proctoring service or individual that I am submitting for approval is (check all that apply):

- An education officer or librarian at a community college, university, elementary or secondary school
- A testing administrator at a college, university or private testing service
- A military Learning Center or military officer of a higher rank than the above-named student
- Other: _____

5. Fill in the proctor's or testing center director's name and organization (e.g., Leon County Public Library, Brevard Community College, Sylvan Learning Center):

Proctor/Testing Center Director Name _____
 Organization Name _____

6. I, the student named above, agree to the following: (1) to locate a proctor or testing center and set up an appointment for my course exam(s), according to published dates; (2) to arrange for fee payment for the proctoring services, if any; and (3) to submit this form to the proctor for completion and to provide him/her the instructions.

The information in Section A is correct to the best of my knowledge.

Student Signature _____ Date _____

Section B. To be completed by the proctor or testing center director.

1. Proctor/Testing Center Director Contact Information:

Proctor/Testing Center Director Name _____ Area Code – Phone Number _____
 Organization _____
 Street Address _____
 City _____ State _____ ZIP _____
 E-Mail Address _____

2. Please check YES or NO for the following statements:

- YES NO My contact information may be made available to UWF students.
- YES NO Fees are assessed to students for services associated with proctored testing.

3. I certify that: (1) To the best of my abilities, I will uphold the UWF Academic Conduct Standards (available at http://uwf.edu/cas/aasr/ACADEMIC_CONDUCT.htm); (2) I have Internet access or email at the testing site that will allow me to download or receive PDF files and print them.

The information in Section B is correct to the best of my knowledge.

Proctor/Testing Center Director Signature _____ Date _____