

Student Proctor Request Form

Proctor Request for Students from Other VCCS Colleges

**Students:**

* This form needs to be completed at least **7 BUSINESS days prior (not including weekends)** to the date you wish to use Germanna Testing Services to take your tests/exams from another Virginia Community College [VCCS].
* A separate form is required for **each** course that you wish to have proctored at Germanna Community College.
* Students are responsible for providing a postage-paid envelope for return of paper exams. We do not provide postage, envelopes or faxing of your tests/exams.
* Germanna Community College Testing Services reserves the right to refuse any test(s) if they are not able to accommodate your instructor’s test requirements.
* Submit all paperwork to FACTesting@germanna.edu

**Student Information**

|  |  |
| --- | --- |
| Full Name |  |
| Student ID Number |  |
| VCCS Email Address |  |
| Full Address,  City, & Zip Code |  |
|  |
| Street Address, City, & Zip Code |  |
| Contact Phone Number |  |

**Other Virginia Community College System (VCCS) School Information**

|  |  |
| --- | --- |
| VCCS College Name |  |
| VCCS College Address,  City, & Zip Code |  |
|  |
| Instructor’s Name |  |
| Instructor’s E-Mail Address |  |
| Course ID (Ex. ENG111) |  |
| Instructor’s Contact Phone No. |  |

**Student Responsibilities:**

* Students are required to present a valid, government issued photo ID.
* Students must have their Student ID number, Course Information, and their instructor’s name.
* If computer, Blackboard, or other electronic format problems occur, the student is to contact the instructor.
* Testing Services will not accept homework from students.
* Students must schedule their tests to allow enough time to complete their exams prior to the posted Testing Center closing time. The Testing Center staff will collect ALL tests at the posted closing time - NO EXCEPTIONS.
* Students must abide by all Testing Services policies and procedures when testing.

**I have read all of the above information and I am aware of and agree to the student responsibilities.**

***(This form must have your written signature, not your typed name.)***

|  |  |  |  |
| --- | --- | --- | --- |
| **Student’s Signature** |  | **Date** |  |

Updated: 12-11-2014