Testing Proctor Form

Student Taking Exam: ______________________________________

Professor/Instructor: ______________________________________

Class: ___________________________________________________

ID Verified: __________________

Date Test Taken: _________________________________________

Start Time of Test: ________________________________________

End Time of Test: _________________________________________

Items allowed for use on the test based on the instructor’s directions:
________________________________________________________
________________________________________________________

I proctored the above test. The student was not allowed access to any
items other than those listed above. The student was not allowed to visit
with anyone during the test and was not allowed access to his or her cell
phone. The student was in direct vision of me during the entire testing time
and was not allowed to leave the testing area during the test.

Printed Name of Proctor: __________________________________

ARC Test Proctor: _________________________________________

Comments: ______________________________________________

________________________________________________________

Comments from student taking the test: _______________________

________________________________________________________

Student