Testing Proctor Form

Testing Proctor Form

Student Taking Exam:		Student Taking Exam:	
Professor/Instructor:		Professor/Instructor:	
Class:		Class:	
ID Verified:		ID Verified:	
Date Test Taken:		Date Test Taken:	
Start Time of Test:		Start Time of Test:	
End Time of Test:		End Time of Test:	
Items allowed for use on the test based on the instructor's directions:		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.		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	Printed Name of Proctor	ARC Test Proctor
Comments:		Comments:	
Comments from student taking the test: _		Comments from student taking the test:	
-	Student		Student