

## Disability Services

### Exam Accommodations Request Form

Students with approved testing accommodations who need to request an exam proctor or distraction reduced testing environment should complete this exam accommodation request form.

#### Procedure

Request form must be completed and submitted to Disability Services 5 business days prior to the regularly scheduled exam date.

- 1) Student completes Section 1 of the form.
- 2) Instructor will complete Section 2 with any instructions Disability Services needs to know in order to proctor the exam.
- 3) Upon completion of this form, **student** will return it to Disability Services located in the Ursinus Institute for Student Success.

If your Test Day is:	Completed form due at Disability Services	Test Received at Disability Services
Monday	Monday before	Friday before
Tuesday	Tuesday before	Monday before
Wednesday	Wednesday before	Tuesday before
Thursday	Thursday before	Wednesday before
Friday	Friday before	Thursday before

**\*Please be aware that if a student does not turn in the form on time, we will do our best to accommodate your request, but may not be able to make arrangements in time for your exam.**

**Section 1 – To be completed by the student**

Student Name: \_\_\_\_\_ UC Email: \_\_\_\_\_

Course Name/Number: \_\_\_\_\_ Professors Name: \_\_\_\_\_

Date of Exam: \_\_\_\_\_ Time of Exam: \_\_\_\_\_ (AM/PM)

\*I have a time conflict with another class & would like to take my exam at: \_\_\_\_\_

Approved Accommodations needed: \_\_\_\_\_ Extended time \_\_\_\_\_ Distraction Reduced Environment

\_\_\_\_\_ Scribe Exam reader \_\_\_\_\_ Enlarged materials \_\_\_\_\_

**Section 2 – To be completed by the professor**

*Please initial to approve times/materials allowed for this exam:*

Alternate test time approval: \_\_\_\_\_

\_\_\_\_ Book \_\_\_\_ Notes \_\_\_\_ Calculator \_\_\_\_ Formulas \_\_\_\_ Tables \_\_\_\_ Dictionary

**Special Instructions (please list)** \_\_\_\_\_

How much time is allowed for in-class exam? \_\_\_\_\_ hours \_\_\_\_\_ minutes

***(Disability Services will calculate the extended time)***

**Exam Delivery** (Exams should be received to Disability Services **at least 24hrs before exam**)

\_\_\_\_ Delivered by Professor \_\_\_\_ Emailed to Director of Disability Services & Lynne Brault

**Test Return to Professor:**

\_\_\_\_ Picked up by professor \_\_\_\_ Delivered by Disability Services to (Bldg/Room) \_\_\_\_\_

Best way to reach you with questions before/during exam: \_\_\_\_\_

Signature of Professor: \_\_\_\_\_ Date: \_\_\_\_\_