Proctor Request

Student Name: ________________________________

Phone Number: ____________________________________________

Email Address: ________________________________

Name of Institution and Class:

Will the test be written or online: __________ (Please note that library computers cannot be guaranteed for over one hour. If your test will take more than one hour, please bring your own computer. The library has wireless internet access.)

What is the deadline for taking the test:

What is the test’s time limit:

Preferred Exam Dates and Time

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

I agree to Boulder City Library’s Proctoring Guidelines.

Student’s Signature: ________________________________ Date: __________

Staff use only below

Test Date(s):

Comments:

Date/Initials: