**Test Room (JEN 336) Request Form**

**ATTENTION FACULTY**

* This service applies ONLY to students registered with ODS
* If instructor is unable to arrange accommodations, please use this form to book Test Room
* This form must be completed by **student and instructor**- Incomplete forms will not be processed
* Submit request forms to **Jackie Seward** (jseward@bentley.edu, X2004) two business days prior to exam- ODS will confirm within 24 hours
* You must provide a hard copy of the exam to ODS 24 hours in advance or exam will be rescheduled
* **STUDENT NAME** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**ID Number**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	+ **Phone**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	+ **In the event of a campus emergency, student needs physical assistance Yes**\_\_\_ **No**\_\_\_
* **INSTRUCTOR NAME** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	+ **Office**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	+ **Phone** (for contact during exam)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **TEST ROOM INFORMATION**
	+ **Course** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	+ **Request Date** (Monday through Friday) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	+ **Time: 9:00 am**\_\_\_\_\_ **12:00 pm**\_\_\_\_\_ **3:00 pm Wednesday only**\_\_\_\_\_
	+ **Number of minutes to complete exam** *(include extra time if applicable)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **ACCOMMODATIONS** *(refer to accommodation plan)*

|  |  |
| --- | --- |
|  | * **Student needs to read exam questions out loud**
 |
|  | * **Reader (proctor to read aloud)**
 |
|  | * **Clarify exam questions**
 |
|  | * **Personal Computer OR Test Room Computer (circle)**
 |
|  | * **Calculator**
 |
|  | * **Use of restroom:**
 |
|  | * **Other:**
 |

* **INSTRUCTIONS/ADDITIONAL MATERIALS** (ex. scrap paper, computer exam, open book, etc.)
	+ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* **RETURN EXAM**
	+ **Pick up JEN 336 \_\_\_\_\_\_\_\_\_\_\_\_\_**
	+ **Campus Mail (Include office location) \_\_\_\_\_\_\_\_\_\_\_\_\_**
* **INSTRUCTOR SIGNATURE** *(confirms form is complete and accurate)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**TEST ROOM DIRECTIONS**

* Student makes contact with instructor one week in advance of exam.
	+ If there is no timely contact with the instructor, accommodations may be provided at the instructor’s discretion.
* Student arranges how exam will be administered with instructor.
	+ Options include: beginning early, staying late, taking the exam in an empty classroom, office hours, etc.
	+ **It is the responsibility of the instructor to coordinate the academic accommodation of extra time and/or a separate exam site.**
* In the event that it is impossible to schedule the exam between the student and the instructor, the student and the instructor must fill out a **Test Room Request Form** available from the Office of Disability Services (JEN 336). Exams can be taken in the Test Room (JEN 336).
	+ Exams begin at 9:00 am or 12:00 pm, Monday through Friday or 3:00 pm Wednesday
* The student and the instructor work together to complete the form **(including all accommodations and instructions).**
	+ *The Office of Disability Services is not responsible for completing any portion of the request form.*
	+ Incomplete forms will not be processed (this includes incomplete information about the student’s accommodations)*.*
* The Test Room Request Form must be submitted to The Office of Disability Services (Jackie Seward) two business days prior to the exam.
* The Office of Disability Services will confirm request within 24 hours.
* Faculty must print exam and drop off to JEN 336 24 hours prior to the exam (must provide hard copy of exam).
* No extra time will be given to students who are late.

**\*This service is only available to students who are registered with the Office of Disability Services\***