**Test Room Request Form**

**JEN 336**

**Information for Faculty:**

* This service applies ONLY to students registered with the Disability Services.
* If you are unable to arrange accommodations, please use this form to book the Test Room.
* This form must be completed by the **student and instructor**-incomplete forms will not be processed.
* Submit request forms to *Shannon Glynn, Disability Services Administrative Coordinator* at least two business days prior to exam date. Request forms can be submitted via email (DStestroom@bentley.edu) or delivered to JEN 336. Confirmation will be sent via calendar invitation to students within 24 hours of receiving this form.
* Exams can be delivered, inter-office mailed to JEN 336, or emailed to DStestroom@bentley.edu.
* **Disability Services must receive the exam at least one business day prior to exam date.**

**Student Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**ID Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* + **Email Address** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
	+ **In the event of a campus emergency, student needs 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 distraction reduced exam location.**
* 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 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 as well as 3:00 pm Wednesday
* The student and the instructor work together to complete the form **(including all accommodations and instructions).**
	+ *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 Disability Services (Shannon Glynn) two business days prior to the exam. The form can be delivered to JEN 336, inter-office mailed to JEN 336, or emailed to DStestroom@bentley.edu.
* Disability Services will confirm the request within 24 hours via calendar invitation.
* Exams can either be delivered to JEN 336, inter-office mailed to JEN 336, or emailed to DStestroom@bentley.edu. Disability Services must receive the exam at least one business day prior to exam date.
* No additional time will be given to students who are late.

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