

Gordon State College
Exam Accommodations Form

Part I

To Be Completed by Student: GSC ID# _____ Semester 2017-18

Student Name: _____ Phone: _____

Instructor _____

Course Name & No. _____ Meeting Time and Days _____

SCHEDULE OF TESTS TO BE TAKEN WITH ACCOMMODATIONS

*Dates and times must be approved by instructor

*Any changes must also be approved by instructor

<u>Test #</u>	<u>Date</u>	<u>Amount of time the class is allotted for the test</u>	<u>Start Time</u>
1)	_____	_____	_____
2)	_____	_____	_____
3)	_____	_____	_____
4)	_____	_____	_____
5)	_____	_____	_____
6)	_____	_____	_____
7)	_____	_____	_____
8)	_____	_____	_____
9)	_____	_____	_____
Final	_____	_____	_____

Type of Assistance Approved: To be completed by the Testing Center

Extra Time (1 ½) _____ Extra Time (Double Time) _____

Enlarged Print _____ Reduced Distraction Space _____

Separate Space (only if specifically approved on accommodation letter) _____

_____ Assistive Technology (ex. JAWS, Braille Reader, electronic reader)

Other (specify) _____

Student Must Return Form Directly to Testing Center
AT LEAST 2 WORKING DAYS PRIOR TO THE TEST

Note: *Submitting a Testing Accommodation Form does not guarantee testing accommodations with the Testing Center. Testing accommodations are provided on a first-come, first-served basis. Exams must be completed between the hours of 8:00 a.m. and 5:00 p.m. Monday – Friday. Weekend hours are not available.*

It may be necessary that the test time needs to be changed by the Testing Center but only with prior faculty approval.

Part II

To Be Completed by the Instructor:

Instructor and student must choose a mutually agreeable time for the test. The test must be received at least twenty-four hours (24) prior to the scheduled test time. Unannounced quizzes are the only exception. Tests may be sent via e-mail, or hand delivery by the instructor or his/her representative (cannot be a student).

**NOTE – if the student is approved to utilize assistive technology or if the test must be enlarged, the Instructor is responsible for providing the exam in electronic format to the Testing Center.

Please indicate how the test will be received by the Testing Center?

_____ Instructor Will Hand Deliver

_____ Email copy to Sue Gilpin (sueg@gordonstate.edu) or the Testing Center account (testingcenter@gordonstate.edu)

_____ Is test on *Brightspace* (D2L) – please email password

*****Faculty – students are allowed to take pen/pencil and water/drink into the room with them when they are tested. Other items are locked up. On the following lines please note if any specific class related material is allowed during the test (e.g., calculator, formulas, note card, etc.) PLEASE BE SPECIFIC: _____***

*****Although not encouraged, students are allowed to utilize the restroom during the test but not access their phone or any materials. Please indicate if you would prohibit this.***

How will the test be returned to the Instructor?

(Students should never be allowed to deliver or pick up tests.)

_____ Instructor Will Pick Up

_____ Instructor's Representative Will Pick Up

Instructor's Signature: _____ Date: _____

Phone: _____ E-mail _____

Testing Center Staff Only

Date Testing form received: _____ TC Staff Initials _____