



Exam Request Form

To order your examination, complete this form and Mail, E-Mail or Fax to the address listed. Incomplete forms may result in a delay of processing your request.

Colorado State University-Pueblo
Extended Studies
2200 Bonforte Blvd.
Pueblo, CO 81001-4901
(719) 549-2316
(800) 388-6154
Fax- (719) 549-2438
extendedstudies@csupueblo.edu

Section A. To be completed by the student

STUDENT NAME _____ DATE _____

ADDRESS _____ PID# _____

(Not Social Security #)

CITY/STATE/ZIP _____ Telephone : () _____

Course Number and Title: _____ Instructor _____

Please bring a stamped envelope with you to your exam so that the proctor may mail in any scratch or hand work required to your instructor following the exam. Scratch paper is often required for exams that include mathematical or scientific equations including business courses.

Term Enrolled: Spring 20____ Summer 20____ Fall 20____

The proctor service or individual I am submitting for approval is:

Check all that apply:

- an education officer or librarian at a community college, college, university, or public library.
- a testing center at a college, university or private testing service
- a military or institutional education officer of higher rank than the named student above.
- a web-based proctoring service (For approved web providers see CSU-Pueblo website. Web proctoring requires access to a computer with a webcam and internet connection for the duration of the exam.)
- Other _____

If other is selected, on the back of this page, please outline why an exception should be granted to approve this individual your proctor. Please note direct contact (phone) between the proctor and CSU-Pueblo Continuing Education will be required to approve a proctor who does not meet one of the qualifications above. **NOTE: Most tests are administered through BlackBoard and require access to a computer with internet during the entire testing period.** If a testing situation with internet/computer access is not possible, please indicate the reason in writing on the back of this form to request paper based exams.

Section B. The designated test proctor must complete this section.

PLEASE PRINT CLEARLY.

A business address, name, and title must be provided for the proctor. Exams will NOT be mailed to private addresses or PO Boxes. **Acceptable proctors are a testing center, military or institutional education officer or designee, continuing education administrator, public librarian or approved web-based proctoring service.** Proctors cannot be: a co-worker, peer or friend, subordinate or direct supervisor of the student, relative, continuing education student or student employee. For questions regarding the appropriateness of a proctor or assistance in locating an acceptable proctor, please contact the Continuing Education office at 1-800-388-6154 for clarification.

PROCTOR NAME _____

PROCTOR TITLE _____ BUSINESS NAME _____

BUSINESS ADDRESS (no home addresses or P.O. Boxes) _____

CITY/STATE/ZIP _____ PROCTOR PHONE NUMBER () _____

PROCTOR E-MAIL ADDRESS _____

Proctor Questions

1. I would prefer to receive exams or password via mail via email
2. Does this testing site provide an internet connection and a computer terminal at which a student could access their learning management system to complete or submit their exam for test administration? Yes No
(If no, a statement from the student regarding the need for paper-based tests must accompany this form.)
3. Are fees assessed at this site for proctoring services? No Yes, approximate fee for a 2 hours testing window \$ _____

I hereby agree to accept the examination(s) forwarded to me by CSU - Pueblo, will proctor the examination(s) in accordance with CSU - Pueblo instructions and will return the examination(s) as specified by CSU - Pueblo. I understand that I may be contacted by the Continuing Education Staff to verify the provided information.

PROCTOR SIGNATURE _____ DATE _____