



**Access Center**

**Test Accommodations Form**

**\*\*\*\*\* STUDENT PLEASE COMPLETE THIS SECTION \*\*\*\*\***

Complete this section and deliver it to your instructor 3-5 school days before the scheduled test date.

Student \_\_\_\_\_  
Name Phone

Course \_\_\_\_\_ Instructor \_\_\_\_\_  
(Example: ENGL 1021.01)

Test \_\_\_\_\_  
Date to be taken Time to Start

**ACCOMMODATIONS REQUIRED (check all that apply)**

- extended time       CCTV/ magnifier       reader/taped test (circle one)
- semi-private room       large print       scribe
- computer       sign language interpreter       tape recorder
- other \_\_\_\_\_  
please specify

\_\_\_\_\_  
Student Signature Date

**\*\*\*\*\* INSTRUCTOR PLEASE COMPLETE THIS SECTION \*\*\*\*\***

Indicate any additional materials student can use for test in section below. Place test in envelope and deliver to Access Center, Room W2440. Please call 779-3354 or 779-3477 with any questions.

⇨ TIME ALLOWED FOR STUDENTS TAKING TEST IN CLASS \_\_\_\_\_ ⇩

**INSTRUCTOR APPROVES USE OF:**

- calculator       scratch paper       use of notes
- formula cards       dictionary       open book
- student has instructor's permission to take test at a time other than the schedule time.

**DELIVERY INSTRUCTIONS FOR RETURNING THE EXAM:**

- Hold for instructor to pick up       Student has my permission to transport test to the Access Center
- Return to instructor's mailbox       Student has permission to return test to instructor after taking test in the Access Center

\_\_\_\_\_  
Instructor's Signature Date

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**Date Given**

**Time Started**

**Time Finished**

**Staff Signature**