

**Center for Access and Success  
Exam Accommodation Form**

**Student's Name** \_\_\_\_\_ **Date of Request** \_\_\_\_\_

**Course Title and Number** \_\_\_\_\_ **Faculty** \_\_\_\_\_

The dates below are the exams/quizzes scheduled in your course for the \_\_\_\_\_ semester. If any of these dates are incorrect or change, please contact the Center for Access and Success at x8711. If there are changes in the dates, requests should be made by the student three business days before the exam.

Date	Day	Time in class	Time in DSS

If your exams are given in the same format for all dates listed above, please take a moment to complete the following information. You will not need to fill another testing form for the rest of this semester. If you have any questions, please contact the Center for Access and Success at x8711.

1. How much time does your class have for these exams? \_\_\_\_\_
2. What can the student use during the time of the exam (e.g. books, calculator, notes, etc.) and if notes, how many pages? \_\_\_\_\_
3. Please deliver the exam(s) to the Center for Access and Success, Group I, Room 016.
4. Where should the Center for Access and Success return the exam(s)?  
\_\_\_\_\_

You will receive the exam(s) in a sealed envelope with a proctor sheet to be signed by you or the department secretary.

\_\_\_\_\_  
Center for Access and Success Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
**Faculty Signature**

\_\_\_\_\_  
**Date**

White copy - Center for Access and Success (Group I, Rm. 016)

Yellow copy - Faculty