Alternative Testing Agreement Template for Instructors

Note: With appropriate permissions, an online version of this form is available for instructors in the Accessible Information Management System.

[COURSE NAME]

STUDENT INFORMATION

Student Name: [Student Name Here]

Agreement Type: Alternative Testing Agreement

INSTRUCTOR INFORMATION

List Instructor(s):

• [Instructor's Name(s) Here]

Phone Number: (###) ###-####

Additional Notes:

AGREEMENT CONTENT

Please list the dates and start times for ALL EXAMS as well as the allotted time for the class to complete each exam. (NOTE: This will not schedule exams; it simply provides a reference for CAS staff.)

• [Exam Dates Here]

In the event that the student cannot take the exam at the same time as the class due to extended testing time conflicting with their other courses or the normal business hours of the Center for Academic Success (M-F 8-5), how would you like the student to proceed?

• [Instructor's Directives Here]

How will the exam be delivered to the Center for Academic Success?

• Upload exam to secure web portal at least 2 hours before exam start time (upload instructions will be included in the email reminder received by the instructor).

Materials allowed (besides pen/pencil)?

• [Instructor's Allowances Here]

What would you like the student to do if clarification is needed during the exam?

• [Instructor's Contact Information Here]

How would you like the exam to be returned to you?

• [Instructor's Return Information Here]

IN-CLASS EXAM LENGTH(S)

- Exam: # Minutes
- Final: # Minutes
- Quiz: # Minutes