Test Scheduling Form
Phone: (804) 289-8639
Email form to: testingcenter@richmond.edu

Please note:
• A Test Scheduling Form needs to be received in the ATC at least 3 business days before a quiz/test/exam.
• Quiz/Test/Exam materials should be delivered to the ATC a minimum of 1 full business day prior to student’s exam.
• Tests are administered Monday through Friday, 8:30 a.m. - 5 p.m. (Tests must be scheduled to finish by 5 p.m., except for finals)

Student Name: _________________________________________  Student UR ID#: ______________________________
Course Subject/# (ex: ENGL 200): ___________________________ Instr. Name: _________________________________
Instructor’s Contact info during exams: Ph: _________________ Instr. Email: _________________________________

Test Type (Check all that apply):
☐ Make-up for approved UR-sponsored athletic events
☐ Make-up for approved UR-sponsored non-athletic events
☐ Study Abroad Proctor
☐ Accommodated (Please include student’s DAN if we don’t already have it on file)

Exam Details/Specifications: Student is permitted to bring and/or use the following (please check at least one):
☐ NONE
☐ Notes
☐ Textbook/Open Book(specify book titles) _____________________________
☐ Textbook/Open Book
☐ Calculator (specify type)
☐ Chem Model
☐ Class or Exam Related Software _____________________________
☐ Computer (refer to ** below)
☐ Audio Clip
☐ Scratch Paper
☐ Video Clip
☐ Other items allowed or additional instructions (including if materials are allowed during some exams but not others)
__________________________________________________________________________________________________
__________________________________________________________________________________________________

** The Academic Testing Center does not have computers available for student use; students must use their own computer and are required to abide by the Honor Code.

<table>
<thead>
<tr>
<th>Exam #</th>
<th>Exam Day/Date Requested (e.g. Fri, Jul 9)</th>
<th>Exam Start Time</th>
<th>Amount of Time Class Receives for Exam*</th>
<th># of minutes class can come early or stay late for exam (if permitted)</th>
<th>Exam Print Instructions:</th>
<th>Delivery of Completed Exam:</th>
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<td>(*Do not add DAN time here - ATC will adjust time)</td>
<td>Early / Late</td>
<td>* Front/Back or Single</td>
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Instructor Signature: __________________________________________________  Date: _________________________

ATC OFFICE USE ONLY

SCHEDULED: Date: __________  Test Start Time: ______________  Test End Time: ______________  Time allowed: __________


Exam emailed / mailed by (circle one): __________________   Exam picked up by: _________________________________

initial and date         sign and date

2/14/2020