Willoughby-Eastlake Public Library Proctoring Agreement

Date________________

Name_____________________________________________________________________________

Email Address_______________________________________________________________________

Contact Number_____________________________________________________________________

Name of School/Institution____________________________________________________________

Course and Instructors Name____________________________________________________________

Contact Number for School or Instructor____________________________________________________

Proctoring:
Willoughby-Eastlake Public Library provides test proctoring for Students who have made arrangements at least one week in advance of the requested test date. Proctoring is available Monday through Thursday from 10:30 am until 4:30 pm or advanced appointment. Students must give at least a week’s (5 working days) notice when wanting to take a test. If necessary, the Library may provide a substitute proctor. If a student arranges to take a test and then fails to appear the student must wait an additional 72 hours (3 days) before the test can be taken (for scheduling purposes)

The student brings current photo ID and all supplies for taking the test. The proctor will provide and area for testing and will periodically monitor the student. The proctor cannot provide continuous monitoring. The proctor will notify the student when the time limit for the test is reached. Students must notify staff before taking an exam if they will need more time than the 45 minute limit. The student will receive a copy of the proctoring guidelines.

• Student given email account information
• Student given copy of guidelines (or emailed to student)

Statement of Responsibility:
Your signature below constitutes an agreement to comply with the following statements:
• I have read the proctoring guidelines.
• It is the student’s responsibility to see if the testing materials were received by the library.

Signature of the Student        ___________________________________________________________

Date/time wanting to take test___________________________________________________________

Alternate date/time to take test__________________________________________________________

For Staff Use Only:
Staff member taking information_________________________________________________________

Staff member assigned to proctor (assigned by Manager)____________________________________

Manager’s initials and date______________________________________________________________