

# Disability Support Services Exam Accommodation Form

## Students

### Scheduling Your Proctoring

- You must provide your instructor with your letter of accommodation as early in the quarter as possible to ensure your instructor is aware you are eligible for the support service of DSS exam proctoring.
- As soon as you are aware of an exam, remind your instructor that you receive DSS exam accommodations and schedule a time to meet and fill out this form.
- When you and your instructor meet to fill out this form, make sure you are both clear on what testing accommodations are allowed through DSS and additional accommodations are allowed by the instructor (materials, notes, etc).
- Make sure you and your instructor have fully and correctly filled out the form and scheduled it with the DSS or Kodiak Corner front desk at least **THREE BUSINESS DAYS** before the exam to allow for scheduling changes and adequate test space.

### Day of the Exam

- Check in with the DSS at least 5-10 minutes before your scheduled exam start time.
- If you arrive later than your scheduled start time, that time will be taken out of your original proctoring time. If you know you will be late, please contact the DSS Office.

## Instructors

### Completing This Form With the Student

- Discuss with the student the specific exam proctoring and accommodation needs and plans, for both the DSS and your allowances.
- Make sure to fill out the form entirely and return it to the student.

### Post-Scheduling of Exam Proctoring

- Information about the DSS exam proctoring will be sent to your Outlook Calendar or a follow-up email will be sent if more information is needed. Please accept the calendar invitation and/or confirm with an email.

### Before the Day of the Exam

- Please remember to submit the exam in the method you indicated on the form the **day before** the exam is scheduled (Monday exams should be submitted by 9am).
- Any updated exam or proctoring information should be emailed to [dssproctoring@cascadia.edu](mailto:dssproctoring@cascadia.edu).

### Alternative Testing Location

- Any alternative testing location arrangements made between instructor and student that do not involve the DSS (testing in instructor's office or other distraction-free location) does not require this form.

### By signing this form, I acknowledge:

- The information on this form regarding exam proctoring is correct, to the best of my knowledge.
- I have read through and agree to the Proctoring Procedures outlined above.
- I must abide by Cascadia College's Academic Integrity policies. I understand that violation of these policies will be reported for further disciplinary actions. These policies can be found at [www.cascadia.edu/academic\\_resources/academic\\_policies.aspx](http://www.cascadia.edu/academic_resources/academic_policies.aspx).
- My exam proctoring may be monitored by video surveillance.

Student Signature

Date

Instructor Signature

Date

**STUDENT INFORMATION**

<b>Full Name</b>		<b>Phone/Email</b>	
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**INSTRUCTOR INFORMATION** Please return form to student when completed

<b>Name</b>		<b>Course/Section</b>	
<b>Email</b>		<b>Phone</b>	
<b>Exam Delivery</b>	<input type="checkbox"/> In-person <input type="checkbox"/> DSS Mailbox (CC1-141) <input type="checkbox"/> Email (dssproctoring@cascadia.edu for DSS; StudentEnrollmentServices@cascadia.edu for COMPASS)	<b>Exam Return</b>	<input type="checkbox"/> In-person pickup <input type="checkbox"/> Faculty Mailbox <input type="checkbox"/> Scanned and Emailed

Use this space to schedule multiple exams, if needed

\*Please clearly differentiate between exams\*

DSS/KC  
Checkmark if date/start time stays the same

Exam Name/ #	Exam Length (Hrs, Min)	Date & Start Time Proctored In Class

<b>Items Allowed During Exam</b>	<input type="checkbox"/> Open Book/Notes <input type="checkbox"/> Computer (Internet access allowed? <input type="checkbox"/> Y <input type="checkbox"/> N) <input type="checkbox"/> Calculator <input type="checkbox"/> Exam Notes: <input type="checkbox"/> Other materials _____ <input type="checkbox"/> Single-sided <input type="checkbox"/> Double-sided <input type="checkbox"/> 3x5 <input type="checkbox"/> 8.5x11 <input type="checkbox"/> Other size _____ <input type="checkbox"/> # Allowed _____
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<b>Additional Comments or Instructions</b>		<b>Instructor initials &amp; date</b>
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**FOR DSS/KODIAK CORNER FRONT DESK USE ONLY** Student, please submit to DSS/KC for scheduling

<b>Scheduling</b>	<b>Exam Date/s &amp; Time/s</b>	
	<b>Location</b>	<b>Extended Time</b>
	<input type="checkbox"/> DSS <input type="checkbox"/> COMPASS	<input type="checkbox"/> None <input type="checkbox"/> 1.5x <input type="checkbox"/> 2.0x
	<b>Date confirmed with instructor:</b>	
<b>Staff initials &amp; date</b>		

<b>Proctoring</b>	<b>Start</b>	<b>10-min</b>	<b>End</b>
	<b>Notes</b>		
<b>Returned to instructor:</b>			
		<b>Staff initials &amp; date</b>	

