

**TESTING ACCOMMODATIONS FORM-Stevens Point Campus**

This form is to be completed by the instructor if a student requires testing accommodations outside the classroom. It is the student's responsibility to deliver this form to the instructor well in advance of the test date. It is also the student's responsibility to schedule a time to take the test in the Library, Campus Office, or with Disability Services and to remind the instructor of such.

**Student's Name:** \_\_\_\_\_

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

**Course:** \_\_\_\_\_

**Instructor:** \_\_\_\_\_

**Should the instructions on this form be used for every test this semester?**    \_\_\_\_\_ Yes    \_\_\_\_\_ No

**Test Date(s) and Time(s)** \_\_\_\_\_

**Normal Time Allowed for Test Completion:** \_\_\_\_\_

**Exam Pick Up** (check one)

\_\_\_\_\_ Instructor will hand deliver the test, in advance of testing date to: (circle one)  
Office    Library    ASC    Disability Services

\_\_\_\_\_ Student will bring test to the test site.

**Exam Return** (check one)

\_\_\_\_\_ Student may return the test to the instructor.

\_\_\_\_\_ Instructor will pick up the test.

\_\_\_\_\_ Test will be delivered to instructor's office or mailbox.

**Special Instructions:** (check all that apply) Student is allowed extended time: 1.5X    2X    untimed    (circle one)

\_\_\_\_\_ May use a calculator

\_\_\_\_\_ May use notes

\_\_\_\_\_ May use dictionary

\_\_\_\_\_ May use spellchecker

\_\_\_\_\_ May use charts/tables

\_\_\_\_\_ May use the computer

\_\_\_\_\_ May use this textbook: \_\_\_\_\_

\_\_\_\_\_ May take at any time

\_\_\_\_\_ Must take at scheduled time.

\_\_\_\_\_ Other: \_\_\_\_\_