**Make-Up Exam Authorization Form**

*Please complete and attach a make-up authorization form to every test copy.*

**Instructor’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Course & Course Number:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Exam Form/Chapter:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(one name per test)**

Time Limit (e.g. 90 mins.): \_\_\_\_\_\_\_\_\_\_\_\_\_ Must be Taken by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(date required)**

Allowable Aids (e.g. none, formula sheets, calculator, etc.): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Responds by:

\_\_\_\_Writing on test copy \_\_\_\_ Using attached answer sheet

\_\_\_\_ Using own paper \_\_\_\_ Using attached Scantron answer sheet

Additional Instructions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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HOW WOULD YOU LIKE THE EXAM RETURNED TO YOU? (please check one)

\_\_\_\_\_\_\_\_ Mailbox (Harriman) \_\_\_\_\_\_\_\_ Mailbox (Oak Ridge) \_\_\_\_\_\_\_\_ (Will pick up)

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

**Instructors:**

Please inform students of the following:

* Picture ID is required to test.
* To check website for the Testing Center’s days and hours of operation, go to [**www.roanestate.edu/testingcenter**](http://www.roanestate.edu/testingcenter)
* When their exam will be available in the Testing Center and which Testing Center.
* What the time limit and permissible aids are for the exam.
* No cell phones are permitted and backpacks/bags need to be stored before coming to the Testing Center.

***To Be Completed in Testing Center:***

***Date Test Was Taken: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Proctor Initials: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

Instructor Forms can be found at <http://www.roanestate.edu/?5449-Instructor-Forms>