Proctor Agreement

Student Agreement:
Student Name: ____________________________________________________________
Address: __________________________________________________________________________________________________
R#: ___________________________ Phone #: _______________________________________
Email: __________________________________________________________________________
Course: _______________________________________________________________________

As a student, I agree to the following:
1. to be responsible to locate a proctor and set up an appointment for the exam
2. to be responsible for reimbursing the proctor for any costs

Student Signature: __________________________________________________________ Date: __________________

Proctor Agreement:
A. Please check one of the following:
   __ I am an education official, librarian, counselor, or teacher at a community college, university, elementary, or secondary school
   __ I am a librarian at a local or regional library
   __ I am a testing administrator or educational services officer for the military
   __ Other (please list: _____________________________________________________________)

B. I agree to the following statements:
   a) I am not a current student at Richard Bland College
   b) I do not work or teach in the same discipline as the course for which the student is being proctored
   c) I am not related to the student
   d) I am not a co-worker of the student
   e) I will personally observe the student throughout the entire examination unless noted in the exam instructions.
   f) I will enforce the guidelines for each test. I understand that the student may not talk with anyone during the test and may only use those materials as noted on exam instructions.
   g) I will not copy or reproduce the exam.
   h) Upon conclusion of the exam, I agree to:
      1. Collect exam materials as required
      2. Provide test materials in a sealed envelope as required

Proctor Signature: _____________________________________ Proctor Name: __________________________
Position: ____________________________________________ Company or Institution: _______________________
Phone #: ___________________________________________ Address: __________________________
Email: _____________________________________________

Student is responsible for returning this form to their instructor either in hard copy or email