

**Center for Access and Accommodative Services**

**Rooms A-105**

**(708)456-0300 ext. 3917 or** **caas@triton.edu**

[**https://www.triton.edu/caas/**](https://www.triton.edu/caas/)

**Faculty Testing Form**

Exams to be taken at CAAS must be accompanied by a completing Testing Form and may be submitted to CAAS in Room A-105 or via e-mail at caas@triton.edu.

|  |  |  |  |
| --- | --- | --- | --- |
| **Today’s Date**:  | Click or tap to enter a date. | **Student (first/last name):** | Click or tap here to enter text. |
| **Faculty (first/last name):**  | Click or tap here to enter text. |
| **Contact number at the time of the exam**: | Click or tap here to enter text. |
|  |  |
| **Class Name, #, and section**  | Click or tap here to enter text. | **Test/Quiz Name:** | Click or tap here to enter text. |
| **Last day student can take exam:**  | Click or tap to enter a date. | **Amount of time your CLASS receives for the exam (do not include accommodative time):** | Click or tap here to enter text. |
|  |  |
| **Please list any materials ALL students are able to use on the exam:** | Click or tap here to enter text. |
| Click or tap here to enter text. |  |
| **Other notes to CAAS:** | Click or tap here to enter text. |

**Note: Exams will be held in CAAS (Room A-105) for Faculty to Pick up. Exams will not be delivered by CAAS staff.**

 Office Use Only

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Appt. Date** |  |  | **Appt. Time** |  |
|  |  |  |  |
| **Equipment allowed for testing** |  |
|  |  |
| **Assigned Testing Location** |  |  | **Accommodative Test Time Allowed:** |  |
|  |  |  |  |  |
| **Testing Date** |  |  | **Time exam must be completed** |  |
|  |  |  |  |  |
| **Proctor** |  |  | **Time exam started** |  |  | **Time exam completed** |  |
|  |  |  |  |  |  |  |  |
| **Entered in CAAS Database** |  |  |

|  |  |  |
| --- | --- | --- |
| **Test Completion Recorded in Database** | \_\_\_ |  |

**Signature of Person Picking Up the Exam \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**