



## CSI Distance Learning Proctor Request Form

**For CSI Class Exams:** To obtain approval for a proctor, please fill out the proctor request form and return to your class instructor's email listed in your syllabus.

### **IMPORTANT PROCTORING INFORMATION:**

- All exams must be taken under the supervision of an acceptable proctor.  
**The proctor may not be a personal friend, family member, tutor, coworker, or another student.**
- Students must recruit a proctor who is willing to certify that he/she will follow the exam instructions. Students are responsible for any fees for testing.
- **Students are responsible** for making all arrangements with proctors.
- Exams are sent **directly** to the proctor by U.S. mail, unless the test is on computer and then test information will be sent via email.

### **Section I: To be completed by the student (please type or print legibly):**

Instructor's Name \_\_\_\_\_ Course Name/Number \_\_\_\_\_

Test Name/Number \_\_\_\_\_

Student's Name \_\_\_\_\_ Student ID # \_\_\_\_\_

Street Address \_\_\_\_\_ Daytime Phone \_\_\_\_\_

City State Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Is the proctor below a new proctor? Yes \_\_\_\_\_ No \_\_\_\_\_

### **Section II: To be completed by the proctor who will be proctoring the exam (Please type or print legibly for exam mailing)**

Proctor's Name \_\_\_\_\_

Title \_\_\_\_\_ Institution Name \_\_\_\_\_

Name and Phone Number of Proctor's Direct Supervisor \_\_\_\_\_

Mailing Address \_\_\_\_\_

(Exams are only mailed to professional addresses and must be administered in a professional office or setting.)

City State Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ E-mail \_\_\_\_\_

Proctor's Signature \_\_\_\_\_