



Distance Learning Programs
PROCTOR AGREEMENT

Semester: Fall ___ Spring ___ Summer ___ Dec. Intersession ___

Course: _____

Student's Name: _____

Email: _____

If your instructor requires Proctor U online proctoring service, please sign below and visit: http://www.proctoru.com/
Please note: All 5000 level or above courses and all exams taken while out of the U.S.A. are required to use Proctor U.

I _____ plan to contact Proctor U to set up online proctoring.
(student's signature)

If your instructor requires a face-to-face proctor/testing center (qualifications), please have the proctor fill out the form below.

Proctor's Name: _____

Title: _____ Email: _____

Employer: _____ Daytime phone: _____

Address: _____

(No P.O. Boxes please)

Relationship to student: _____

I hereby agree to proctor tests and quizzes taken by the above named students. I will carefully review the guidelines for administering each test and will certify that each test was administered in accordance with the guidelines supplied to me. Examples of guidelines include permitting the student to have only the stated time to take the test, if it is a timed test; not allowing use of any notes or reference materials, if it is a closed-booked test; and not allowing any colleague to provide assistance.

I understand that the tests and final examination are to be sent to my attention and that I am to ensure that they are held confidential and never shared with the student until administered. If the tests are administered online, I will keep URLs and passwords confidential.

I will collect paper tests at the end of the specified time and will write the following statement on the test: "I have proctored this test in accordance with the specified instructions." Sign and date them.

I will then FAX or Overnight Mail the completed test to the OSU A&S Outreach office. If I fax the exam, I will mail the original to you the following day. If a copy of the completed exam is retained, I will file it until the student's grade is returned, at which time I will destroy it.

Proctor's Signature: _____ Date: _____

Please complete and return this form via FAX (405-744-6992) or mail to:

Angie Kelly/Andrea Eddington
OSU Arts & Sciences Outreach
213 Life Sciences East
Stillwater, OK 74078-3017
Questions, call: 405-744-5647