

Form 1: Exam Proctoring Approval Form**TO BE COMPLETED BY STUDENT:** (please print)

Student Name: _____ Student Email Address: _____

Student Phone: _____ Course Name: _____

Course Teacher Name: _____

Proposed Date and Time of Exam (Duration: 3 Hours): _____

TO BE COMPLETED BY PROCTOR: (please print)

Proctor Name: _____ Proctor Phone: _____

Proctor's Institutional Email Address: _____

Occupation and Proof of Certification: _____

****Proctor: please attach a scanned copy of your professional certification card to this form when returning it to our Rosedale Academy contact, Farah Merchant, at Farah.Merchant@rosedaleacademy.com**

Institution Name: _____

Institution Address: _____

Suggested Site for Completion of Examination: _____

PROCTOR APPROVAL AND AGREEMENT: (please print)

Proctor: please send a direct email to Farah.Merchant@rosedaleacademy.com to confirm your willingness to act as a proctor. Once we receive your email, we will confirm your proctoring agreement with Rosedale Academy and will send you the exam.

TERMS OF PROCTORING ARRANGEMENT:

This exam must be administered and supervised by you. Please read and sign below:

I am not related to the student named above, nor am I the student's friend, or a supervisor of the student. I agree to personally administer the test(s) to the above student and I will not leave him or her unsupervised during the exam. I further understand that this is a voluntary, non-paying position, unless arrangements are made between the student and proctor.

Proctor Signature: _____ Date: _____

Please return this form to Farah Merchant at Farah.Merchant@rosedaleacademy.com.

Form 2: Exam Proctoring Completion Form

The exam will be emailed to the Proctor 1-3 days before the exam date.

PLEASE FILL OUT THIS PAGE AFTER THE EXAM. Then, please email it to:

Farah.Merchant@rosedaleacademy.com

Student Name: _____

Proctor Name: _____

Exam Name: _____

Exam Date and Time: _____

Proctor email address: _____

I verify that:

1. The student listed above took the exam on: (date) _____.
2. I personally observed the student complete this full exam.
3. The student used no notes, books, phone, or other media device while completing the exam.
4. The student took this exam in one sitting with no interruptions.
5. The student finished this exam at: (time) _____ and this was within the allotted 3 hours specified on this exam.

The above exam was taken under my supervision and in accordance with the guidelines listed above.

Proctor Name: _____ **Proctor Signature:** _____

Date: _____