

SHSU Services for Students with Disabilities (SSD)

SSD Testing Form

To Be Completed by Instructor and submitted to the SSD Office in person at the Lee Drain Annex, by Fax 936-294-3794, or by E-Mail: disability@shsu.edu

Link to SSD Testing Procedures: <http://www.shsu.edu/dept/disability/testing-procedures.html>

Student Name: _____

Course #: _____ Class Day/Time: _____ Campus: _____

Date of Appointment: _____ Appointment Time: _____

Instructor: _____

Instructor Phone: _____ Standard Time Allowed for Exam: _____

Student May Use the following:

- Graphing Calculator
- Scientific Calculator
- Four Function Calculator
- Handout Provided
- Open Notes
- Open Book
- Note/Formula Card
- Note/Formula Sheet
- Software/Website (Please Specify Below)
- Scratch Paper (Provided by proctor)
- Other (Please Specify Below)

NO Materials Allowed (other than pencils, Scantron, or Blue Book)

Special Instructions: _____

Please return exam by ONE of the following methods (SSD does not hand-deliver exams):

<input type="checkbox"/> Campus Mail (Fill in Mail Box Number) _____	<input type="checkbox"/> Instructor Pick-Up _____
<input type="checkbox"/> Email (Fill in Address) _____	<input type="checkbox"/> Other Pick-Up (Fill in Name) _____
<input type="checkbox"/> Fax (Fill in Number) _____	<input type="checkbox"/> Sealed Envelope Sent with Student (Specify Bldg. and Room Number) _____

Instructors Signature: _____

Below for SSD Office use:	Test Scheduled for: _____
TF Received: _____	Test Received: _____
Test Taken: _____	Proctor/Reader: _____
Professor Called/Emailed: _____	Test Returned/Picked Up: _____