



**Testing Hours: Monday-Friday 9:00 a.m.- 4:45 p.m.**  
**Tuesday during Spring/Fall 9:00 a.m. - 8:45 p.m. by appointment.**  
**Test Proctoring Form – Disability Services Testing Center**  
Phone: 703-993-1708 | Fax: 703-993-4306 | [dstests@gmu.edu](mailto:dstests@gmu.edu) | <http://ds.gmu.edu>

**Student Completes This Part**

Name and G#: \_\_\_\_\_ Course: \_\_\_\_\_

I have read and agree to abide by all the [Disability Services Testing Center policies and procedures](#) for exam proctoring. I agree to abide by the [Mason Standards](#), and that violation of the Honor code will be reported to the Office of Academic Integrity. I understand that the Disability Services Testing Center is monitored by cameras through a closed-circuit security system. If I use a testing center laptop, I understand that it will also be monitored through school management software.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Instructor Completes This Part**

Name: \_\_\_\_\_ Email: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Date of Exam: \_\_\_\_\_  
Scheduled Start Time: \_\_\_\_\_ Length of exam (no accommodations): \_\_\_\_\_

**Exam Materials – Check all that apply**

None	Student's Laptop	Simple calculator (4 function)
Open book	DSTC laptop	Scientific calculator (e.g., Ti-30x)
Open notes	Lockdown Browser or Canvas	Graphic calculator
Scantron	Internet Access	Dictionary
Bluebook	Additional materials/special instructions: _____	

<b>Exam Delivery (Check One):</b>	Emailed to <a href="mailto:dstests@gmu.edu">dstests@gmu.edu</a>	<b>Exam Return (Check One):</b>	Emailed to professor by COB
	Blackboard or Canvas		Blackboard or Canvas
	Student Delivers		Student Returns
	Professor Delivers		Professor Picks Up

Professor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Disability Services Completes This Part**

Extended Time:	Location:	Scantron Scribe
Scheduled start:		R&WG
Scheduled end:		Scribe
Time Started:		JAWS
Time Ended:	Locker:	