

For OAS Only: Extended Testing Time

OFFICE OF ACCESSIBILITY SERVICES

Testing Accommodation Form

Part 1- Must be completed by the student

Today's Date:	Student's Name:
Professor's Name:	
Course:	Class time:
Part 2- Must be completed by the Professor	
Last date	Testing time
testing permitted:	for all students
Testing aids permitted for the entire class:	
Yes, indicate/explain below ((notes, calculator etc.) No testing aids permitted
Phone number in case OAS needs to contact you:	
Students will not be permitted to use aids unless indicated by Professor*	
Additional Testing Instructions:	
Test Return Instructions:	
Will pick up test	fax or email