Make-Up Testing Request Form

Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Instructor’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date range allowed for student to take the test:

Beginning Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Date allowed to test: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Scheduling of Test is the responsibility of the student

* Testing Center Hours
	+ Monday 1:00pm-4:00pm
	+ Tuesday 9:00am-12:00pm
	+ Wednesday 9:00am-12:00pm
	+ Thursday 1:00pm-4:00pm
	+ Friday 1:00pm- 4:00pm
* Testing during evening or other hours may be arranged only in advance by appointment.

 Call Dr. Mary Pflanz at 913-621-8764 or Katie Blevins at 913-621-8734, or email testing@donnelly.edu .

Directions for Monitoring the Test

Time Limit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

May Write on Test? \_\_\_\_\_\_ Yes \_\_\_\_\_ No

May Use Notes? \_\_\_\_\_\_ Yes \_\_\_\_\_ No

May Use Textbook? \_\_\_\_\_\_ Yes \_\_\_\_\_ No

May Use Calculator? \_\_\_\_\_\_ Yes \_\_\_\_\_ No

Accommodations or Special Instructions: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Routing of Completed Test

 \_\_\_\_\_Hold in Testing Center \_\_\_\_\_\_ Put in Mailbox \_\_\_\_\_ Other?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thank you! For questions or concerns, email or call Dr. Mary Pflanz

mpflanz@donnelly.edu or 913-621-8764