

Proctor Agreement Form

Student Agreement (please type or print):

Student Name:

Address:

Phone #:

E-Mail:

Course:

As a student, I agree to the following:

- 1. To be responsible to locate a proctor and set up an appointment for the exams.
- 2. To be responsible for payment of any costs of faxing/mailing exams.
- 3. To be responsible for any/all proctoring fees.

Student's Signature:

Date: _____

Return to: Victoria College

ATTN: Enter Instructor's Name Here

2200 East Red River

Victoria, TX 77901

Phone: Type Business Phone Number Here Fax: Type Business Fax Number Here

Email: Enter Instructor's E-Mail Here

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Proctor Agreement:

A. Please check one of the following:

_____ I am an education official, testing administrator or teacher at a community college or university.

_____ I am a testing administrator or an educational services officer for the military.

B. I agree to the following statements:

a. I am not a current student at Victoria College

b. I do not work or teach in the same discipline as the course for which the student is being proctored

- c. I am not related to the student
- d. I am not a friend or co-worker of the student
- e. I will keep paper exams sealed in an envelope until test time.

f. I will keep all passwords confidential.

g. I will personally observe the student throughout the entire examination unless otherwise noted in the exam instructions.

h. I will not provide assistance in interpreting or completing the exam.

i. I will enforce the guidelines/instructions listed for each test. I understand that the student may not talk with anyone during the course of the exam and may use only those materials indicated on the exam instructions. Once an exam is started, it must be completed. If the student stops before completing the exam, the exam must be taken up and faxed/mailed/e-mailed back to the instructor.

j. I will not copy or reproduce the exams under any circumstances.

k. Upon the conclusion of the time allotted for the examination, I agree to:

1. Collect all examination materials

2. (if necessary) Fax completed test and/or answer sheet to the number indicated in the instructions, place all examination materials in an envelope and mail within 24 hours or e-mail the test information to the instructor. **The student may not mail the exam.**

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Proctor Agreement (continued):

Proctor's Information (please type or print):

Name:
Position:
Name of Company or Institution:
Business Address:
Business Telephone Number:
Fax Number:
E-mail:

I accept the responsibility for proctoring the Victoria College examinations in accordance to the statements outlined above.

Signature:

Date: _____

Return to: Victoria College

ATTN: Enter Instructor's Name Here

2200 East Red River

Victoria, TX 77901

Phone: Type Business Phone Number Here Fax: Type Business Fax Number Here

Email: Enter Instructor's E-Mail Here

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