**INSTRUCTORS:**

* Complete ***one form per student per exam*.**
* ***Forward completed form and exam*** to a Testing Center email address listed below.
* Please submit tests ***at least 24 hours in advance*** of the requested testing date.

**Date Received by Testing Center**

**Start time:**

**End time:**

**Returned to Instructor**

|  |  |  |
| --- | --- | --- |
| **Student Name:** *Click here to enter text.* | | **Date Submitted:** *Click here to enter a date.* |
| **Instructor Name:** *Click here to enter text.* | **Contact Email:** Click here to enter text. | |
| **Contact Phone:***Click here to enter text.* | **Test must be taken by:** *Click here to enter a date.* | |
| **(within 10 days of submission date)** | |

**Course Prefix, Number, & Section:** *Click here to enter text.*

**TEST-TAKING INSTRUCTIONS: *(Check all that apply)***

|  |  |  |
| --- | --- | --- |
| **Closed book test** | **Scratch paper allowed** | **Use Scan Sheet -** Specify Side To Use. |
| **Open book test** |  | **Use 8 ½ Lined Paper - Provided By Instructor** |
| **Notes may be used** | **No Calculator may be used** |  |
| **Dictionary may be used** | **Four Function Calculator** |  |
|  | **Standard/Scientific Calculator** |  |
|  | **Graphing Calculator** |  |
|  |

**\*\*Additional Instructions / Comments / Directions for Accessing Testing Programs: *(See Reverse)\*\****

**TIME LIMIT FOR TEST:** Click here to enter text. **Hrs.** Click here to enter text. **Min.**   **No Time Limit**

**NOTE: Students are informed of their testing parameters at the time of testing. All exam periods are documented since an individual’s test taken time cannot always be supervised.**

**RETURN COMPLETED TEST:**

**Via email:** *Click here to enter text.*

**Via United States Postal Service** ***(Pre-Paid Return Postage Required****)*

**Via Fax #***Click here to enter text.*

**INSTRUCTIONS FOR DISPOSING** **OF** **UNTAKEN ORIGINAL TESTS:**

**Shred**

**Return via United States Postal Service *(Pre-Paid Return Postage Required)***

**PLEASE NOTE: MCC Testing Centers archive all taken unreturned exams for one year before they are destroyed (per a records storage management memorandum).**

**TESTING LOCATIONS:**

**Elkhorn Valley Testing Center** [**testingcenterevc@mccneb.edu**](mailto:testingcenterevc@mccneb.edu) **Room 217 531-622-1278  
Fort Omaha Testing Center** [**testingcenterfoc@mccneb.edu**](mailto:testingcenterfoc@mccneb.edu) **Building 23, Room 311 531-622-2204  
Sarpy Center Testing Center** [**testingcentersrp@mccneb.edu**](mailto:testingcentersrp@mccneb.edu) **Room 116 531-622-3803**

**South Omaha Testing Center** [**testingcentersoc@mccneb.edu**](mailto:testingcentersoc@mccneb.edu) **Connector Bldg, Room 102 531-622-4613**

**Signed by student at the Testing Center**

|  |
| --- |
| **Student Signature**  ***I certify that I am the above named person taking the test.*** |

**OTHER INSTRUCTIONS / COMMENTS /DIRECTIONS FOR ACCESSING ONLINE TESTS (INTERNET BASED):**

*Click here to enter text.*