



Date Submitted: _____

ITV Request for Dedicated Proctor

Faculty members: Please complete sections as indicated below - A, B, C, D.

____ **Dedicated Proctor Only** (A, B)

____ **Paper Test Proctor** (A, B, C) ____ **ITV Online Test in Lab** (A, B, D)

Request Approval (to be completed by ITV staff) Request is: ____ Approved ____ Approval Pending * *Explanation: _____ ____ Class Information ____ Materials (A Only) Distribute: ____ Beginning ____ End of Class	Date Approved: _____
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SECTION A

Instructor Name:	Date Needed:
Course Name:	Class Meeting Time:
Start/End Date for Proctor:	Site(s) Requested for Dedicated Proctor: ____ Alva ____ Enid ____ WW ____ PC ____ Other* * _____
Please note date if request is for more than one consecutive date: _____ All Semester? _____	

SECTION B

Reason for Request:	
____ Class size greater than 10 at a single site	____ Exam in Lab administered
____ Presentation/activity that requires technical assistance	____ Paper exam
____ Student requiring assistance for ADA needs	____ BlackBoard Exam
____ Other (please elaborate) _____	

SECTION C

Reserved Lab Testing	Password:
____ Closed book, no notes	____ Cell phone not allowed
____ Open book, with notes	____ Lockdown Browser Required
____ Open book, no notes	Explanation:
Allow student to enter password: Yes ____ No ____ Facilitator Must Enter	
Calculator Allowed: __ Yes __ No Open Internet: __ Yes __ No	

SECTION D

Online E-Test Proctoring	Test Name:
____ Closed Book, No Notes	____ Open Internet
____ Closed Book With Notes	____ Closed Internet
____ Open Book, No Notes	____ Lockdown Browser Requested
____ Open Book With Notes	____ Optional: Attaching Class Roster to Email
____ Other:	
____ Website Allowed (if any):	
____ No Calculator Allowed	____ Any Calculator Allowed (Note: Students will be able to use any stand-alone calculator but NOT a cell phone, tablet or computer calculator.)
____ Restricted Calculator Acceptable as described below: (Note: Students will be able to use the restricted stand-alone calculator but NOT a cell phone, tablet or computer calculator)	
____ Other:	

This form must be completed electronically and emailed as an attachment to Chauncey Durham at cadurham@nwsu.edu and copied to Bridget Napoli at bsnapoli@nwsu.edu, Jake Boedecker at jgboedecker@nwsu.edu. Approval of the request will be communicated to the faculty member via email and copied to the office of the Dean of the Faculty. Please provide the requested information including an explanation where needed, to ensure that consideration of the request may be handled efficiently. **If you have any questions, please contact Chauncey Durham at 580-213-3155. We will make every effort to respond to requests within 48 hours.**