



OSD Test Request Form

Instructor: Please complete this part of the form and attach it to the copy of the student's exam.

Instructor's Name: _____ Phone: _____

Student's Name: _____ Course: _____

Campus student will be testing at: Leesburg South Lake Sumter
Test Format: Computer-Based Paper-Based

Last date/time this exam can be given: _____ Time limit: _____

Other instructions: _____

Materials student can use. Please be specific (e.g type of calculator student may use):

NONE or _____

Test Return Policy:

Completed tests will be scanned and sent to the instructor via Blackboard. The original copy of the test (if applicable) will be available for pickup at the OSD Central Office located in the SSB Advising Lobby. All non-retrieved tests will be shredded at the end of the semester.

Instructor's Signature: _____ Date: _____

Student (To be completed at testing session):

You must abide by the LSSC honesty code: "I will neither give nor receive unauthorized aid on any academic work, nor will I utilize any resources not specifically approved by my instructor for this test. I will not represent the work or ideas of another as my own, nor will I discuss this test with anyone. Failure to abide by these guidelines may result in my not receiving credit, possible failure of the course, and can lead to additional conduct code violation sanctions."

Student Signature: _____ Date: _____

For OSD or Learning Center Use Only:

Date Administered: _____

Time taken: Begin _____ End _____

Comments: _____

Proctor Signature: _____