

Handley Regional Library



Proctor Service Request Form

A Public Library Serving Winchester, Frederick and Clarke Counties

Note to Applicant: Prior to filling out this form, carefully read the Proctoring Rules & Guidelines and check with your educational institution to make sure that all of the testing requirements can be met by the Handley Regional Library.

Name: _____

Library card no. _____ (must be in good standing)

Phone number: _____

Email address: _____

Institution name: _____

Institution contact info. _____

Course name / number: _____

Test date(s) requested: _____

I have reviewed and agree to the Handley Regional Library's Proctoring Rules & Guidelines.

I agree to pay all exam-related expenses (copying, faxing, scanning, etc.) incurred.

I understand that although the library staff will do its best to meet my scheduling needs, the library staff will make the final date and time decisions regarding the test schedule.

I will arrive for the examination at the scheduled time and date. If I do not arrive at the scheduled time, it will be my responsibility to contact the proctor to request another date & time.

I understand that a library staff member is obligated to follow the instructions and time limits of the examination sponsor.

I agree to follow all instructions of the library staff member regarding the examination.

Signature: _____ Date: _____

Library Staff Use Only:

Proctoring Expenses Incurred:

Copies (.15 per page) _____

Faxing (minimum charge \$2.00 / .25 per page over 8 pages) _____

Scan & emailing (minimum charge \$2.00 / .25 per page over 8 pages) _____

Other (please describe) _____

Total charges: _____ Paid (staff initials & date) _____

Scheduled Exam date & time: _____

Test/password received from institution: _____

Staff member: _____

Notes: