

## Alternative Testing Agreement

(To be completed by Instructors and returned by student to Exam Services. Information from this form will be entered into our AIM system on the Instructor's behalf)

**Course number and section:** \_\_\_\_\_ **Student's name:** \_\_\_\_\_

Exam Services provides exam accommodations for students with disabilities registered with our office. The Testing Agreement is to be completed by the instructor with details regarding what materials and instructions students in the classroom are allowed during exams.

A student in your course is eligible to receive exam accommodations. Instructors need to complete one Testing Agreement per class per section they are teaching each semester.

Students are to schedule exams at regular class time unless the student has a conflict with their class schedule or with Exam Services hours of operation. In this case, students are instructed to discuss alternate start times with their instructors. If an exam is scheduled at an alternate start time, please contact the student or Exam Services with any questions.

For online exams that do not require a proctor, please confirm with the student that their extended time accommodation is in place. A Testing Agreement is not needed.

If you will proctor the exam yourself and have any questions regarding providing exam accommodations, please contact Disability Services (361-825-5816).

You may also view our AIM Guide for Instructors at <http://disabilityservices.tamucc.edu/AIM-guide-for-instructors.pdf>

**Please indicate your instructions by circling/filling in each question below.**

1.) You may send the exam to Exam Services in one of the following ways:

- a) Preferred Method: Email to [exam.services@tamucc.edu](mailto:exam.services@tamucc.edu)
  - b) Deliver hard copy of exam to Corpus Christi Hall 116.
  - c) Exam will be administered on Blackboard or other course website. If password is required, instructor will email that to [exam.services@tamucc.edu](mailto:exam.services@tamucc.edu).
  - d) Send with Examinee in a sealed envelope.
  - e) For extenuating circumstances only: On the day before the exam, Exam Services staff can pick up the exam at: (Specify below).
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2.) Please list from your syllabus the quiz and exam dates. This will not schedule exams for the student, only provides a reference for Exam Services. (Students are to schedule exams at class time unless there is a conflict with their class schedule or Exam Services hours of operation.)

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3.) Please list REGULAR CLASS EXAM LENGTH without extended time accommodations:

a) Exam \_\_\_\_\_ minutes

b) Final \_\_\_\_\_ minutes

c) Quiz \_\_\_\_\_ minutes

Additional note or comment: \_\_\_\_\_

4.) Please specify what items the class is allowed to use for exams: (Exam Services provides lockers for cellphones and personal items).

a) No special items allowed.

b) calculator (specify type) \_\_\_\_\_

c) open Book

d) open Notes

e) special item (3x5 index card, formula sheet, etc.)

f) scantron (specify type) \_\_\_\_\_

g) Bluebook

h) Software (MATLAB, AutoCAD, Respondus Lockdown Browser etc.)

(specify) \_\_\_\_\_

i) scratch paper

j) other: \_\_\_\_\_

Additional note or comment: \_\_\_\_\_

5.) How would you like questions/clarifications from the student during the exam?

\_\_\_\_\_

6.) How do you prefer completed exams to be returned to you?

a) I or my TA will pick up the exam from Exam Services (Corpus Christi Hall 116).

b.) Exam Services will deliver to: (Specify). \_\_\_\_\_

(Exams completed after 5:00 p.m. will be delivered the following day).

Additional note or comment: \_\_\_\_\_

Instructor's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Instructor's signature: \_\_\_\_\_