To be completed by STUDENT – Please print clearly or type:

Name: ______________________________________________________ Campus ID: ____________________________

Address: ______________________________________________________________________________________

City, State, Zip: __________________________________________________________________________________

Current Daytime Phone No.: ____________________________

To be completed by PROCTOR – Please print clearly or type AND check the appropriate category below:

Proctor meets criteria because she/he is a: (check one)

— member of the HR/Training staff within student’s place of employment
— university, community, or technical college faculty/staff member
— student services worker, adviser, counselor, or related staff member
— K-12 school principal, guidance counselor, or teacher
— delegated official of a college testing center
— certified public librarian in a supervisory position
— certified public accountant (CPA)
— other: ____________________________________________

Note: Proctors may not be relatives, close personal friends, or other students.

Name: ______________________________________________________________________________________

Title/Position: __________________________________________________________________________________

Company/Business Name: ________________________________________________________________

Company/Business Address: _________________________________________________________________________________________________________________

City, State, Zip: ______________________________________________________________________________________

Daytime Phone No.: ____________________________ Daytime Fax No.: ____________________________

E-mail: ______________________________________________________

I have met the above-named student and agree to proctor examinations for this student in accordance with the Rules and Responsibilities for Proctored Exams and directions provided by the instructor and the Department of Engineering Professional Development (EPD). I certify that the information on this form is true and complete, that I am not a relative or close personal friend of the student named above, and I am not a student. I understand that inaccurate or misleading information may affect the student’s academic status in the EPD program. I also agree to notify EPD immediately if any of the above information or circumstances change.

Proctor’s Signature ____________________________________________ Date ____________________________
Rules and Responsibilities for Proctored Exams

Student Responsibilities

• Provide the Proctor Approval Form and ask that he/she submit the completed form to the Department of Engineering Professional Development (EPD) as soon as possible, no later than the end of the second week of the course start date.
• Coordinate arrangements with a proctor to take the exam. If you need to switch proctors during a term, please notify EPD as soon as possible.
• Before your scheduled exam, confirm that your proctor has received instructions and access to exam materials.
• Pay any testing fees, if applicable.
• Present proctor with a photo ID prior to beginning the exam.
• Be aware of time limits on your exams and keep track of the time.
• If unusual circumstances occur, please contact EPD or your instructor as soon as possible.

Proctor Responsibilities

• Submit the completed, signed and dated Proctor Approval Form to EPD as soon as possible, no later than the end of the second week of the course start date.
• Receive exam access instructions from EPD and keep them in a secure place.
• Arrange for a quiet location for the student to sit for the exam. Exams may not be administered at a private residence; a professional setting is required.
• Identify the student with a photo ID prior to beginning the exam.
• Notify the student of what they are allowed to use on the exam (i.e. notes, calculator), as described in the exam instructions. Cell phones and other electronic devices must be turned off and put away.
• Make sure the student is aware of the time limit on the exam. Time limits must be strictly followed.
• Supervise the student taking the exam.
• Terminate the exam if the testing procedure is compromised due to the student’s improper conduct and notify EPD as soon as possible.
• If other unusual circumstances occur, contact EPD as soon as possible.
• Submit the completed exam per instructions. Students may not submit completed exams.
• Delete or discard all copies of exams after completed exam submission.
• If you are unavailable to provide assistance at the time of the exam, you agree to provide the name, email and phone number of your designee to EPD using the contact info below.

Student Services
Phone: 608-262-2061 or 800-462-0876
Fax: 608-263-3160
Email: studentservices@epd.engr.wisc.edu

EPD Responsibilities

• Collect required information from student and proctor.
• Approve proctor and maintain proctor contact information.
• Provide all necessary access to exams and instructions to proctors and students.
• Notify instructor if the proctor feels the exam procedure has been compromised.
• Answer questions and help solve problems that arise during the proctor setup and exam process.

Department of Engineering Professional Development
432 North Lake Street  Madison, Wisconsin 53706
Phone: 800.462.0876 or 608.262.2061  Web: epd.engr.wisc.edu  Fax: 608.263.3160