



College of the Redwoods, Del Norte

Disabled Students Programs & Services
Testing Accommodations Form

Instructors: Please complete the following form so that the DSPS staff in the LIGHT Center may properly administer the attached exam for your students.

Instructor's Name:	Date:
Course & Test Title:	# of Test:
Date & Time of Test:	Campus Phone #:
Time Allowed: (DSPS calculates extended time)	
<input type="checkbox"/> Hold Test in LIGHT Center <input type="checkbox"/> Put in Mailbox <input type="checkbox"/> other:	

Please Check the Appropriate Boxes:

Yes No

- 1. Mark answers on test.
- 2. Use a Scantron.
- 3. Use blue book or separate test sheet.
- 4. Dictionary and/or Thesaurus allowed.
- 5. Open book test. Name of book: _____
- 6. Notes allowed. Limitations: _____
- 7. Calculator allowed.

Additional Instructions: _____

Name of Students: _____

Received by: _____ **Date & Time:** _____

Thank you for your cooperation. Please call x2352 if you have any questions. -DSPS Staff