

Online Proctored Exam Form

Please print this form and bring it with you when you take your exam. This form must be completely filled out and signed by both you and your proctor. Upon completion of the test, this form must be faxed to 630-839-0013 before credit will be issued. Do not schedule any state test until you receive your official transcript. You will need that form to sit for your test.

Contacting the institution and proctor for the exam and any costs associated with the proctored exam, either site or proctor, are the student's responsibility. Appointment dates and times for examination are at the convenience of the proctor.

loday's Date		
Student Identification and Contact Inform	nation	
Student's Name:	Phone:_ <u>(</u>)
Student's License Number: (If Applicable)		
Course Number and title:		
Student's Address		
City:	State:	Zip:
Student's Email Address:		
I hereby certify that I have personally take		uring this exam, nor did I rece
any knowledge help relating to the inforn	nation inside the exam.	
(Student Signature)		
Proctor Certification and Contact Informa	<u>tion</u>	
Proctor's Name:	Phone:_ <u>(</u>)
Proctor's Official Title:		
Proctor's Institution:		
City:	State:	Zip:
Proctor's Phone Number (including area code).	:	
I attest that I have verified that the stude		
identification. I understand that the stud		
of this exam. I will call 877-316-0600 ext	802 with any discrepancies or concern	s regarding these statements.
(Proctor Signature)		