

**STARK STATE COLLEGE OF TECHNOLOGY
INDIVIDUAL STUDENT - MAKE-UP TEST FORM**

Instructor: For each individual student, for each test, please complete this form and attach it to a **hardcopy** of the test with the **Scantron**. **Each make-up test requires its own cover sheet.** Please allow enough time for interoffice mail to deliver the test or hand carry it to the Testing Center. Please be aware that **we DON'T have the ability to time the tests**. Please inform your students that a **photo-ID is required**, and that if they arrive at the posted closing time, they will only have one hour to complete their test.

Faculty Name: _____ **Student Name:** _____
Test Window Dates: _____ to _____
Phone Number/Extension: _____ **Office Number:** _____
Course Title: _____

*Please indicate any **special/additional materials** the student may use, otherwise the student will only be permitted to use a pen or pencil at the testing station.*

C calculator:	<input type="checkbox"/> Scientific	<input type="checkbox"/> Dictionary	<input type="checkbox"/> Textbook	<input type="checkbox"/> Formula Sheet
	<input type="checkbox"/> Graphing	<input type="checkbox"/> Scratch Paper	<input type="checkbox"/> Notes	<input type="checkbox"/> Computer/Internet
	<input type="checkbox"/> Financial	<input type="checkbox"/> Handouts	<input type="checkbox"/> Periodic Table	<input type="checkbox"/>

Other: _____

SPECIAL INSTRUCTIONS: _____

- *Instructors must provided needed Scantrons which should be inserted in the test.*
- *We do not have the means to accommodate whole classes to take a written test at one time.*
- *We cannot download tests. Tests must be either hand delivered or sent via inter-office mail*
- *Instructors must pick up the completed tests from the boxes in C107.*

Revised 3/25/2009

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