HIGHLAND COMMUNITY COLLEGE
TESTING CENTER

Today's Date:

Student Name:

Instructor Name:

Course Number/Name:

Testing Window:

Time Limit: ☐ No Limit ☐ 1 hour ☐ 1 1/4 hours ☐ 1 1/2 hours ☐ 2 hours ☐ 3 hours ☐ Other:

Password for Moodle Exams:

Permitted Testing Materials: Check all that apply. All scratch paper used for testing will be collected.

☐ Dictionary ☐ Thesaurus ☐ Scratch paper ☐ Textbook

Calculator: ☐ No Calc. ☐ Standard ☐ Scientific ☐ Graphing

Notes: ☐ None ☐ 1-3x5 Notecard ☐ 1-5x7 Notecard ☐ 1-8½ x 11 Sheet

Additional Directions:

Date Administered:
Time Begun:
Time Finished:

Proctor's signature:_____