

Metropolitan State College of Denver
Surveying and Mapping Program ~ Distance Delivery

Proctor Request Approval Form

Please print or type all information.

Student Information: <i>To be completed by student.</i>	
Name _____	Course Number _____
Student number _____	
Address _____	Telephone Numbers
_____	(w) _____
_____	(h) _____

I have been asked by the student named above, to proctor a modularized examination. I understand that the exam cannot be completed in one sitting and for that reason, I agree to supervise more than one exam-taking session for this student. Appointments to work on the exam will be set up at our convenience. Between exam-taking sessions, I will be responsible for the exam's security. It will not be allowed outside of the facility described below. When exam is complete, I will return it by mail to the Extended Campus at Metropolitan State College of Denver in the envelope provided to me upon receipt of the exam.

Signature

Date

Please print or type all information.

Proctor Information:	
Name: _____	Title: _____
Address: _____	Facility: _____
_____	_____
_____	_____
Telephone Number: _____	
Supervisor: _____	

For questions, please call (303) 721-1313 at Metro South/ Extended Campus/ Distance Delivery ~ Surveying and Mapping Program.

Metropolitan State College of Denver
Extended Campus ~ Surveying and Mapping Program