

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

**Examination Proctor Request Approval Form**

Please print or type all information.

Student Information: <i>To be completed by student.</i>	
Name _____	Course Number _____
Student ID 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 session 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 document security. It will not be allowed outside of the facility described below. When the 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.*

\_\_\_\_\_  
Proctor Signature

\_\_\_\_\_  
Date

Please print or type all information. Business cards can be attached

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

Fax form to 303-220-1787 or mail to:

Metro State/ Extended Campus  
Surveying and Mapping Distance Delivery  
5660 Greenwood Plaza Blvd. #100  
Greenwood Village, CO 80111

For questions, please call the Survey department (303) 721-1313.