



University of  
**West Florida**  
School of Allied Health and Life Sciences  
**PROCTOR APPROVAL FORM**

This Proctor Approval Form is required for all proctored exams in the School of Allied Health and Life Sciences (SAHLS). A proctor may be any of the following outlined on the form.

Proctors may *not* include a student's relatives, friends, spouse, neighbors, and co-workers. Proctors will usually supervise examinations without charge; **students must, however, assume any charges that may ensue**. Most exams are submitted electronically in the presence of the proctor. If the exam must be submitted in hardcopy, the student must supply the proctor with a stamped envelope for postal mailing, and the proctor is responsible for sealing, signing, and mailing the exam.

Proctors and students must uphold the **UWF Academic Conduct Standards** available at <http://uwf.edu/JudicialAffairs> and agree to the **School of Allied Health and Life Sciences' Honor Code** and **Proctored Exam Policies and Procedures** available at <http://uwf.edu/sahls>.

SAHLS will need to verify a proctor's credentials before a student can take any examination. The Director of the School of Allied Health and Life Sciences reviews each proctor selection and reserves the right to reject any proctor.

Students must complete the **Proctor Approval Form** below and return per the instructions provided with the exam for which the student is scheduling proctoring services.

Prior to the exam date, students must review the following documents:

- **UWF Academic Conduct Standards** available at <http://uwf.edu/JudicialAffairs>
- **School of Allied Health and Life Sciences' Honor Code** available at <http://uwf.edu/sahls>
- **School of Allied Health and Life Sciences' Proctored Exam Policies and Procedures** available at <http://uwf.edu/sahls>

Students should be prepared to sign a statement prior to beginning any exam indicating a review of these documents has been conducted.

When arriving for a proctored exam, students are required to bring:

  **X**   **Two forms of identification (ID)**

- One form of ID must be a UWF Nautilus card with photo.
- A second form of ID may be photo, or non-photo, such as:
  - a government issued identification card (e.g., driver's license or passport)
  - debit or credit card matching the exact name on the UWF Nautilus card
- Please note: Social security cards are not acceptable for identification.

  **X**   **Permitted exam aids**

- Please bring only items pre-approved for use during the exam, such as:
  - a scientific calculator - if permitted in the instructions provided with the exam
  - other pre-approved exam aids - if permitted in the instructions provided with the exam
- If there are any questions regarding permitted exam aids, students should seek verification from instructors prior to the exam date.



School of Allied Health and Life Sciences  
PROCTOR APPROVAL FORM

<b>Section A.</b> To be completed by the student.	
<b>1. Student Contact Information:</b> Name _____ Area Code – Daytime phone number _____ Your UWF Email address _____ Area Code – Evening phone number _____	
<b>2. Course Number and Instructor or Exam Name</b>	<b>3. Semester and Year</b>
<b>4. The proctoring service or individual that I am submitting for approval is (check all that apply):</b> <input type="checkbox"/> A full-time faculty member/administrator or education officer/director or librarian at a corporation, community college, university, elementary or secondary school <input type="checkbox"/> A testing administrator at a college, university or private testing service <input type="checkbox"/> A military learning center or commissioned military officer <input type="checkbox"/> A supervisor/manager within your organization, BUT outside of your primary department <input type="checkbox"/> Other: _____ <b>NOTE: Relatives, friends, spouses, neighbors, and co-workers are not acceptable proctors.</b>	<b>5. Fill in the proctor's or testing center director's name and organization (e.g., Leon County Public Library, Brevard Community College, Sylvan Learning Center):</b> Proctor/Testing Center Director Name _____ Organization Name _____
<b>6. I, the student named above, agree to the following:</b> (1) to locate a proctor or testing center and set up an appointment for my course exam(s), according to published dates; (2) to arrange for fee payment for the proctoring services, if any; and (3) to submit this form to the proctor for completion and to provide him/her the instructions. The information in Section A is correct to the best of my knowledge. Student Signature _____ Date _____	
<b>Section B.</b> To be completed by the proctor or testing center director.	
<b>1. Proctor/Testing Center Director Contact Information:</b> Proctor/Testing Center Director Name _____ Area Code – Phone Number _____ Organization _____ Street Address _____ City _____ State _____ ZIP _____ E-Mail Address _____	
<b>2. Please check YES or NO for the following statements:</b> <input type="checkbox"/> YES <input type="checkbox"/> NO My contact information may be made available to UWF students. <input type="checkbox"/> YES <input type="checkbox"/> NO Fees are assessed to students for services associated with proctored testing. <input type="checkbox"/> YES <input type="checkbox"/> NO I am a relative, friend, spouse, neighbor, and/or co-worker of the above named student. <b>If yes to any of these categories, you cannot serve as a proctor of this exam.</b>	
<b>3. I certify that:</b> (1) To the best of my abilities, I will uphold the <b>UWF Academic Conduct Standards</b> , available at <a href="http://uwf.edu/JudicialAffairs">http://uwf.edu/JudicialAffairs</a> and the <b>School of Allied Health and Life Sciences' Honor Code and Proctored Exam Policies and Procedures</b> , available at <a href="http://uwf.edu/sahls">http://uwf.edu/sahls</a> , and (2) I have Internet access and email at the testing site that will allow me to download or receive PDF files and print them. The information in Section B is correct to the best of my knowledge. Proctor/Testing Center Director Signature _____ Date _____	