UW-PLATTEVILLE DISTANCE LEARNING CENTER—STUDENT PROCTOR NOMINATION FORM

****TO BE COMPLETED BY STUDENTS LIVING OUTSIDE OF THE UNITED STATES****

Before completing this form, you must read the Guidelines for Distance Learning Program Proctor. You must choose a person who is fluent in English and who is from one of the following approved, professional categories: 1) a professor or dean at a university or testing center, or an official designated by a dean or professor, 2) an American embassy information/education official, or 3) a U.S. military base information/education official.

(Submit form to UW-Platteville Distance Learning Center, 1 University Plaza, Platteville, WI 53818; or scan/email to disted@uwplatt.edu)
For questions, call 800.362.5460.

STUDENT’S NAME ___________________________ Student’s Job Title (no abbreviations) ___________________________

Student’s Employer or Business Name ___________________________

Student’s Employer Address ___________________________

Student’s Home Street Address ___________________________ City __________ State ______ Zip ______

Daytime Telephone (________) __________ Campus E-Mail Address: __________________________@uwplatt.edu

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PROCTOR’S NAME ___________________________ PROCTOR’S JOB TITLE ___________________________ (please DO NOT use abbreviations)

Identify the location where exams will be sent AND administered (THIS MUST BE THE PROCTOR’S BUSINESS/ WORK ADDRESS, NOT A PRIVATE HOME ADDRESS):

Proctor’s Employer or Business Name ___________________________

Street Address: ___________________________

Business Mailing Address (if different than street address) :

City ___________________________ State ______ Zip ______

Proctor E-mail Address ___________________________

Proctor’s Work Phone No. (________) __________ Proctor’s Fax No. (________) __________

THE ABOVE INFORMATION WILL BE VERIFIED—BE SURE TO GIVE COMPLETE INFORMATION AND ANSWER ALL FIELDS. IF THIS FORM IS NOT COMPLETE, IT WILL BE RETURNED TO YOU.

Specify the type of setting in which exams will be administered (i.e., office, library, etc.) ___________________________

Student’s relationship to proctor - be specific ___________________________

How long have you known the proctor? ___________________________

(Your proctor will need to see an I.D. with a picture before you can take exams, if he/she is not previously acquainted with you—please have the I.D. available when you go to take exams.)

The proctor has the ability to scan/email or fax completed exams to the instructor: YES NO

I have read the rules for taking proctored exams and agree to abide by them. I certify that the information on this form is true and complete and I understand that if I supply inaccurate or misleading information, I may be subject to discipline and my academic status with the University of Wisconsin - Platteville may be affected. I will also notify the Distance Learning Center office of any changes in the above information.

Student’s signature ___________________________ Date ___________________________

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SECTION BELOW FOR DLC OFFICE USE ONLY

PRE-APPROVED? YES NO MAYBE University Signature ___________________________ / Date ___________________________

Comments ___________________________

********************SECTION BELOW FOR DLC OFFICE USE ONLY***********************