

Anne Arundel Community College Test Administration Form

INSTRUCTOR/COURSE INFORMATION

Instructor _____

Course Title _____

Test Title _____

Date _____

Contact Info *(Used in Testing Office Only)*

Office Ext. _____ Cell/Home # _____

Email _____

Office Use Only

ID # _____

Log In _____

Date _____

Time _____

Log Out _____

Date _____

CAMPUS DELIVERY/RETURN INFORMATION

COURSE TYPE	ADMINISTRATION SITE	RETURN METHOD
<input type="checkbox"/> AACC Hybrid <input type="checkbox"/> AACC Make-up/Early <input type="checkbox"/> AACC Online Course <input type="checkbox"/> AACC TeleCourse <input type="checkbox"/> Other School Test _____	<input type="checkbox"/> Arnold <input type="checkbox"/> Arundel Mills <input type="checkbox"/> GBTC <input type="checkbox"/> Fort Meade	<input type="checkbox"/> Instructor Pick Up <input type="checkbox"/> Inter-Office Mail Mail to: _____ <input type="checkbox"/> Other _____ <input type="checkbox"/> Return Exam w/ Answer Sheet?

STUDENT INFORMATION

ADMINISTER TO:

TEST ADMINISTRATION INFORMATION

<p>TESTING ALLOWANCES <i>(If make-up, allowances may not exceed those available to students in classroom).</i></p> <p>Calculator:</p> <p><input type="checkbox"/> Student's <input type="checkbox"/> Testing Office (TI-83 or TI-84)</p> <p><input type="checkbox"/> Computer for Essay</p> <p><input type="checkbox"/> Open Book</p> <p><input type="checkbox"/> Open Notes</p> <p><input type="checkbox"/> Other - Specify: _____ or</p> <p><input type="checkbox"/> NO ALLOWANCES</p> <p>TIME LIMIT <i>(in minutes)</i> _____</p> <p>DATES FOR EXAM _____ TO _____</p> <p>NUMBER OF TESTS SENT _____</p> <p><input type="checkbox"/> CHECK IF ADDITIONAL COMMENTS OR INSTRUCTIONS ARE ON THE BACK OF THIS FORM.</p>	<p>ADA ACCOMMODATIONS <i>(A student must have a documented disability to receive accommodations).</i></p> <p><input type="checkbox"/> Extra Time Allowed: _____</p> <p><input type="checkbox"/> Reader</p> <p><input type="checkbox"/> Scribe</p> <p><input type="checkbox"/> Computer</p> <p><input type="checkbox"/> Quiet Room</p> <p><input type="checkbox"/> Large Print <i>(please provide enlarged or digital materials)</i></p> <p><input type="checkbox"/> Other - Specify: _____</p> <p>ANSWER FORM</p> <p><input type="checkbox"/> Blue Book</p> <p><input type="checkbox"/> Scantron # _____</p> <p><input type="checkbox"/> Test Paper</p> <p><input type="checkbox"/> Other _____</p>
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AACC TESTING OFFICES CONTACT INFORMATION

Arnold	SUN 240	410 777 2375	410 777 4007 (FAX)	testing-arnold@aacc.edu
Arundel Mills	Room 112	410 777 1915	410 777 4009 (FAX)	testing-amil@aacc.edu
GBTC	Room 208	410 777 2906	410 777 4008 (FAX)	testing-gbtc@aacc.edu