



Student Disability Services
 One Bernard Baruch Way • VC2-272
 New York, NY 10010 • P: 646-312-4590
Exam.SDS.Proctoring@baruch.cuny.edu

Request for Exam Proctoring

Please send completed request to Exam.SDS.Proctoring@baruch.cuny.edu or deliver it to SDS NVC 2-272 one week prior to the date of the exam.

All Exams are proctored by SDS Monday through Friday 9 A.M. to 5 P.M.

Student: Part One

Name: _____ Course Name: _____

Instructor: Part Two (To be completed by the instructor only)

Name: _____ Signature: _____

Phone #: _____ E-Mail: _____

Exam date/time: _____ What time does this class meet? _____

For evening/weekend students (alternative date & time): _____

How long is the actual exam time? _____ (Please allow us to calculate the time for the student)

Instructions to the class, if any? (calculator, open book, notes, etc.) _____

How will Student Disability Services obtain the exam? (Choose ONE):

Professor will e-mail the exam to SDS: Exam.SDS.Proctoring@baruch.cuny.edu (preferred—thank you)

Professor will deliver exam to VC 2-272 on Date _____ Time _____

Please choose one of the following:

Scan and e-mail to me at the address I provided above

I will pick up the completed exam from VC 2-272 on Date _____ Time _____

EXAM RETURN RECORD—FOR USE by STUDENT DISABILITY SERVICES ONLY

Returned to: _____ Signature: _____ Date: _____ Time: _____