

University of Nebraska at Kearney
Biology Comprehensive Exam
Proctor Information

Approved proctors may include local college testing centers, a local public library, public school teachers, guidance counselors, school principals, or school superintendents. Proctors must not be related to the test taker and must not be someone enrolled in the course. Please have your test proctor complete the bottom portion of this form. Upon completion, please scan and return the form to msbiology@unk.edu or fax to 308-865-8045 Attn: MS Biology Coordinators.

TO BE COMPLETED BY THE STUDENT:

Student's Name: _____ Date: _____

Student ID#: _____ Email: _____

When do you plan to take the exam? _____

TO BE COMPLETED BY THE PROPOSED TEST PROCTOR:

I hereby agree to serve as a test proctor for the above name student. I will provide a quiet atmosphere for the student to take the exam, will monitor the student during the assessment period, and will mail the completed test to the Biology Department.

Proctor's Name: _____

Proctor's Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Phone: _____

Testing Site:(if different than above) _____

Relationship to student: _____

Proctor's Signature: _____ Date: _____