



Dallas Colleges Online | Dallas County Community College District

Proctor Nomination Form

Please complete **one form for each online course** you are taking that requires proctored testing.

This form should be completed, **the signature of the proctor notarized**, and sent to the following address no later than 10 days after the beginning of the course:

Dallas Colleges Online / LeCroy Center
9596 Walnut Street
Dallas, Texas 75243-2112

Please Print Clearly

STUDENT NAME _____		
PHONE NUMBER _____		
ADDRESS _____		
CITY, STATE, ZIPCODE _____		
EMAIL _____		
STUDENT ID _____		
COURSE NUMBER	SECTION	COURSE TITLE
INSTRUCTOR NAME _____		

Special Testing Equipment Or Conditions Required:

CONDITION REQUIRED	_____
I WILL / WILL NOT BE ABLE TO SUPPLY	_____
EQUIPMENT REQUIRED	_____
I WILL / WILL NOT BE ABLE TO SUPPLY	_____
NUMBER OF PROCTORED TESTS IN COURSE	<input type="text"/>

To Be Completed By Proctor Nominee:

NAME	_____
TITLE	_____
PLACE OF EMPLOYMENT	_____
OFFICE ADDRESS	_____
OFFICE PHONE	_____
FAX NUMBER	_____
EMAIL ADDRESS	_____

I Am Able To Recieve And Return Testing Materials By:

CHECK ALL THAT APPLY

- EMAIL:** THROUGH AN INSTRUCTIONAL SERVER
- REGULAR MAIL / UPS:** USING OFFICIAL LETTERHEAD
- FAX:** USING OFFICIAL LETTERHEAD

Must Be Notarized

I will agree to serve as the proctor for the student identified above. As test proctor, I will recieve, administer and return all tests according to the directions provided to me. I will certify that the student completed the test according to the directions provided. The tests I agree to proctor are:

- ALL COURSE TESTS
- FIRST COURSE TEST ONLY
- OTHER (PLEASE SPECIFY) _____

INITIAL

I AM NOT RELATED TO THIS PERSON

DATE _____

SIGNATURE _____

NOTARY SIG/SEAL _____