☐ Need to Scan
☐ Saved
For Office Use Only

Start Time:
End Time:
Date:
For Office Use Only

SUNY SCHENECTADY

Testing Center

Elston Hall, 427 • (518) 381-1293
TestingCenter@sunysccc.edu

COVERSHEET: Exam Accommodations

Student completes this section:

Student Name:

Preferred Name and/or Pronouns:

Date and Time of Exam Appointment:

Instructor's Name:

Course Name:

Instructor completes this section:

Class time allotted:	1.5x time =	2x time =

Please mark appropriate testing preferences and approved accommodations

☐ Open Book ☐ Online resources allowed	☐ Closed Book	☐ Extended time ☐ Distraction reduced ☐ Word processor ☐ Reader ☐ Writer/Scribe ☐ Other:
☐ Calculator	☐ No Calculator	
☐ Notes Allowed ☐ Brightspace allowed	☐ No Notes	
☐ Scantron: please provide		

Special Instructions:

Exam no longer valid after: