Test Information Form

University of Alaska Southeast Testing Center

Course Name and Number:	
Number of Students Testing	
Student Name(s):(attach a roster or leave blank if all stu	dents in class are tested)
Instructor Name:	
Instructor Contact Phone:	
	Instructions
Date(s) the exam may be taken:	
Material the student <u>may</u> use: (calculator, textbook, notes, etc.)	
☐ No Time Limit ☐ Time Lin	mit of
Restroom breaks allowed:	Yes No
Special Instructions:	
Completed exams will be picked up:	by instructorby TA
We appreciate receiving a master copy be made.	(specify name) y of each exam just in case extra copies need to
Reg	gular Hours*:
Monday	9 AM - 6 PM
Tuesday	9 AM - 6 PM
Wednesday	9 AM - 6 PM
Thursday	9 AM - 6 PM
Friday	Closed
Saturday	Closed
Sunday	3 PM - 7 PM

^{*}Check <u>uas.alaska.edu/juneau/tlc</u> for holiday closures and summer/interim hours.