



## OFF-CAMPUS TESTING PROCTOR REQUEST FORM

Please complete the following form and send by mail or e-mail to the following address. Additional information included on the next page.

Radford University Carilion  
Testing Center Coordinator  
101 Elm Avenue, SE  
Roanoke, VA 24013-2222

E-mail address: [ruc-etc@radford.edu](mailto:ruc-etc@radford.edu)  
Telephone number: 540-224-4895

### Part I: To be completed by the student

Student Name:	
Contact Phone:	
E-mail Address:	
Course/Semester:	
Instructor's Name:	
Justification for Request:	

### Part II: To be completed by the proctor

Proctor Name:	
Title:	
Place of Employment:	
Office Address:	
Office Phone:	
E-mail Address:	
Fax Number:	

I agree to serve as the proctor for the student identified above. As test proctor, I will receive, administer and return all tests according to the directions provided. I will certify that the student completed the test according to the directions provided. **I certify that I am not related to the student.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_