Test Center

Test Parameters Form

testcenter@craftonhills.edu  909-389-3361

This form is for instructors to complete and deliver or email to the Test Center office, along with each exam and/or quiz. Delivery of this form by students will not be accepted.

__________________________________________________________________________  ________________________
Student Name        Exam title or number

__________________________________________________________________________  ________________________  __________________
Date of exam        Time of exam        Allotted class time for exam

The above student is permitted to use the following materials on the listed exam or quiz:

☐ Notes
☐ Text Book
☐ Multiplication Grid
☐ Excel
☐ Calculator: specify calculator type __________________________
☐ E-Book
☐ Cell Phone
☐ Smart Watch
☐ Other: __________________________________________________________________

Instructor pick-up method

☐ Pick up from Test Center
☐ Scan and E-mail to Instructor e-mail address

Instructor contact number and e-mail ____________________________________________

__________________________________________________________________________  ________________________
Instructor Signature        Date