



1. **Class Exam - please attach a course roster, if applicable.**

Student's Make-up(s) - Student Name(s): _____

2. **Instructor Directions: Please choose and complete the following sections.**

Paper-Pencil Exams

Exam Name/Number	Time Limit (mins)	Uvc tv" cp flqt" Fwg Dateu

	Password	Time Limit	

3. **Items Allowed During Exams:**

Pencil and scratch paper;

Text book;

Notes/Notecard(s); Please specify: _____

Calculator; Please specify: _____

Formula sheet(s); Please specify: _____

Please specify any additional requests, such as the scanning of scratch paper, etc.