

## Verona Public Library Proctoring Services

The Verona Public Library provides free exam proctoring services. Please review the guidelines below and complete the questionnaire to request a proctor. Upon completion of this form a proctor will contact you to set a date and time for the exam to be administered.

If you require the library to proctor more than one exam, you do NOT need to complete this form for each course. Include all relevant instructor and course information on the reverse side of this page. If you have additional questions in the meantime, you can email the library at [vplproctoring@ci.verona.wi.us](mailto:vplproctoring@ci.verona.wi.us) or call (608) 845-7180 ext 3.

1. Availability of proctoring services is based on staffing and can only be scheduled during the hours that the library is open.

Monday - Thursday | 9:00 am - 9:00 pm  
Friday | 9:00 am - 6:00 pm  
Saturday | 9:00 am - 4:00 pm  
Sunday | 1:00 pm - 5:00 pm

*\*Exams must be completed at least 15 minutes prior to the library's closing time.*

2. It is the responsibility of the student to arrange for proctoring services prior to taking the exam. *Same day or walk-in proctoring requests can be denied at the discretion of library staff.*

3. Students are also responsible for the following:

- ensuring paper copies and/or online exam passwords have been received by library staff.
- bringing all required materials to exam site (photo ID, calculator, pencils, scrap paper, etc).
- knowing and upholding the rules set forth by the library and educational institution.
- postage and mailing costs incurred for returning the exam to the testing institution, if applicable.

4. Students may request that the library provide a laptop if taking an online exam.

The laptop must be requested in advance. *If using the library's equipment, please note that no additional software can be downloaded to the device.*

**Student Information**

Name (First and Last): \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Preferred Method of Communication: \_\_\_\_\_

**Institution Information**

Educational Institution: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Name of Instructor(s): \_\_\_\_\_

Course Name(s) and Number(s): \_\_\_\_\_

\_\_\_\_\_

Test Type:    Paper            Online/Electronic    Other/Unknown: \_\_\_\_\_

Institution Contact Phone Number: \_\_\_\_\_

Institution Contact Email Address: \_\_\_\_\_

\_\_\_\_\_

Institution Contact Fax: \_\_\_\_\_

*I have completed this Proctoring Service Request form to the best of my abilities.  
I understand that completion of this form does not guarantee establishment of proctoring services.*

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

