

PROCTOR REQUEST FORM

Student Name: _____

Course and Section Number: _____

Date and Time Exam will be taken: _____

Proctor's Name: _____

Proctor's Location: _____

Proctor's Title/Position: _____

Proctor's Email Address: _____

Proctor's Phone Number: _____

****If any of this information changes, please notify me at least two days in advance of the exam!

Please email (charlesp@latech.edu) or fax (318-257-2182) the completed form to Dr. Charles Patterson, Mathematics & Statistics, Louisiana Tech University.