In order to maintain the quality and integrity of Counseling and Student Disability Services (CSDS), the following procedures and expectations are in place:

- Students must be registered with CSDS and must be eligible for test/quiz accommodations. NOTE: Student should provide his/her accommodation memo to instructors before the student requests to test at CSDS.
- Students and Instructors should schedule time to meet to discuss the test/quiz accommodations indicated by CSDS on the Accommodations Memo.
- Instructors are responsible for providing the accommodations but can consult or use CSDS to facilitate these accommodations in CSDS office.
- If the test/quiz takes place outside the CSDS office, the student and Instructor must agree to the logistics of a distraction reduced testing environment.

Taking Test/Quiz at Counseling and Student Disability Services

- CSDS will adhere to the test/quiz times submitted on the Proctor Request Form.
- Students are expected to arrive at CSDS at the time indicated on the Test/Quiz Proctor Request Form. If a student is late to the scheduled test/quiz, the end time will not be extended.
- If a student is unable to take a scheduled test/quiz, he/she must notify CSDS and the instructor as soon as possible. It is the student’s responsibility to contact the instructor to reschedule the test/quiz. (Note: Once scheduled, instructors are not obligated to reschedule a test/quiz. CSDS will only administer test/quiz with prior instructor approval.)
- All personal belongings and/or any materials not indicated on the Test/Quiz Proctor Request Form must be stored in the designated area.
- Once a test/quiz begins, students may only leave the testing room for a restroom break or if breaks are allowed as a designated accommodation.
- No food or drinks is allowed in the testing room unless it is a designated accommodation.
- Camera may be recording during the test/quiz.

Committing an Act of Academic Dishonesty

- South Texas College takes the issue of academic dishonesty very seriously. If academic dishonesty is observed or suspected, the instructor will be notified immediately. Refer to the South Texas College Code of Conduct regarding academic dishonesty which can be found at http://www.southtexascollege.edu/pdf/Student_Code_Of_Conduct.pdf
- Suspected academic dishonesty during testing at CSDS will result in the videotape, screen shot or other evidence being submitted to the instructor. The instructor will determine whether the student is/is not engaging in academic dishonesty behavior during testing and will proceed accordingly. The incident will also be reported to Student Rights and Responsibilities.
Counseling and Student Disability Services (CSDS)

Test/Quiz Proctor Request Form

<table>
<thead>
<tr>
<th>Pecan Campus</th>
<th>Mid-Valley Campus</th>
<th>Starr County Campus</th>
<th>Technology Campus</th>
<th>Nursing &amp; Allied Health Campus</th>
</tr>
</thead>
<tbody>
<tr>
<td>3201 W. Pecan Blvd</td>
<td>400 N. Border</td>
<td>142 FM 3167</td>
<td>3700 W. Military Hwy.</td>
<td>1101 E. Vermont</td>
</tr>
<tr>
<td>McAllen, Texas 78502-9701</td>
<td>Weslaco, Texas 78596</td>
<td>Rio Grande, Texas 78582</td>
<td>McAllen, Texas 78503</td>
<td>McAllen, Texas 78502</td>
</tr>
<tr>
<td>Phone: (956) 872-2173</td>
<td>Phone: (956) 447-1229</td>
<td>Phone: (956) 488-5853</td>
<td>Phone: (956) 872-6125</td>
<td>Phone: (956) 872-3077</td>
</tr>
<tr>
<td>Fax: (956) 872-3430</td>
<td>Fax: (956) 447-6607</td>
<td>Fax: (956) 488-5843</td>
<td>Fax: (956) 872-6169</td>
<td>Fax: (956) 872-3055</td>
</tr>
<tr>
<td>Building K 2.900</td>
<td>Building F 110</td>
<td>Building G 1.304C</td>
<td>Building B 175</td>
<td>Building 1.408</td>
</tr>
</tbody>
</table>

Staff/Faculty: Please attach this form to the test/quiz and deliver to Counseling and Student Disability Services (CSDS) a minimum of three (3) business days prior to the test/quiz and notify the student to contact our office to schedule the date and time of the test/quiz.

Student Name: ___________________________ SID #: ___________________________

Instructor’s Information:
Name: ___________________________
Phone #: ___________________________
Email: ___________________________

Test/Quiz Information:
Date: ___________________________
Duration of test/quiz: ___________________________
Start Time: ___________________________
Technical Support Contact: ___________________________

(Extended time will be calculated by the CSDS staff when applicable. If software is used for the test/quiz please include a contact person for the technical questions.)

Type of Test/Quiz
_____ Computer Test/Quiz
_____ Paper Test/Quiz

If computer test/quiz, please supply password: ___________________________

Material/items the student is authorized to use during the test/quiz:
- Distraction reduced test/quiz environment
- Scribe
- Extended Time for Tests
- Notes/Handouts
- Memory Aid
- Calculator (specify type):
- Scratch Paper
- Reader for Oral Test/Quiz
- Interpreter
- Formulas
- Book
- Text Magnifier
- Dictionary/Spell Checker
- Other:

FOR OFFICE USE ONLY:
DATE RECEIVED: ___________________________
RECEIVED BY: ___________________________
TEST/QUIZ START DATE AND TIME: ____________
END TIME: ____________
TEST/QUIZ LOCATION: ___________________________
READER/SCRIBE/INTERPRETER/PROCTOR: ___________________________
COMMENTS: ___________________________
DATE TEST RETURNED: ___________________________
RETURNED BY: ___________________________

PREFERRED METHOD TO RETURN TEST/QUIZ:
_____ I WILL PICK IT UP AT THE STUDENT DISABILITY SERVICES OFFICE
_____ PLEASE SEND IT TO MY SCHOOL MAILBOX
_____ PLEASE EMAIL IT TO MY SCHOOL EMAIL
COMMENTS: ___________________________

STATEMENT OF EQUAL OPPORTUNITY: No person shall be excluded from participation in, denied the benefits of, or be subject to discrimination under any program or activity sponsored or conducted by South Texas College on the basis of race, color, national origin, religion, sex, age, veteran status or disability. Updated by SEP, 03/2017.

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