

**Texas Tech University**  
**Department of Plant and Soil Science**  
**Proctor Approval Form**

**I To be completed by Student**

**Student Contact Information**

Name \_\_\_\_\_  
Email \_\_\_\_\_ Phone \_\_\_\_\_  
Online Course Name, Number & Section \_\_\_\_\_

**The proctoring service or individual that I am submitting for approval is:**

An education officer or librarian at a community college, university, elementary or secondary school

A testing administrator at a college, university or private testing service

A military Learning Center or military officer of a higher rank than the above-named student

**I, the student named above, agree to the following:** (a) to locate a proctor or testing center to proctor each course exam and return this form to the instructor by the due date provided by the instructor, or listed in the syllabus; (b) to arrange an appointment for each exam, and complete each exam during the specific time periods provided by the instructor, or listed in the syllabus; (c) if proctoring services require fees, I will arrange for fee payment.

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

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**II To be completed by Proctor or Testing Center Representative**

\_\_\_\_\_  
Proctor/Testing Center Contact Person's Name Area Code/ Phone Number  
\_\_\_\_\_  
Organization  
\_\_\_\_\_  
Address  
\_\_\_\_\_  
City/State/Zip  
\_\_\_\_\_  
Email Address

**YES**  **NO** Check appropriate box if fees are required for proctoring services.  
If yes box is checked, fees in the amount of \$\_\_\_\_\_ will be assessed for services associated with each proctored exam.

**I certify that for the student named above:** (a) I do not have any conflict of interest, and am not a relative, friend, or associate; (b) I agree to serve as an exam proctor subject to the testing guidelines of the TTU Department of Plant and Soil Science; (c) to the best of my knowledge information in Sections I and II are correct.

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