Received Date:



Testing Arrangement Form

Return completed forms to: [North Bldg. Rm.300] or email [accesstesting@hunter.cuny.edu]

For assistance, please call 212-650-3582 or email accesstesting@hunter.cuny.edu

Requests must be submitted at least TWO WEEKS before exam date. Late requests are not guaranteed.

Hours of Operation: (Mon-Thurs 9:00-7:00 PM, Friday 9:00-5:00 PM)

Section A: The following must be completed by the STUDENT						
Student Name:				Instructor Name:		
Student Contact Information:(email/phone)				Instructor Contact Information:(email/phone):		
EMPLID:				Course/Section & Classroom location:		
Exam Date	1	2	3	4	MIDTERM	FINAL
Start Time	1	2	3	4	MIDTERM	FINAL
Exam Length: (Do Not Calculate)	1	2	3	4	MIDTERM	FINAL
Do any of these exams <u>conflict</u> with a class schedule, or are outside Access Center's office hours? Yes (STOP! Discuss an alternative time and/or date of the exam(s) with your professor and proceed to " <u>Section B"</u>). No (Ask your Professor to fill out "Section C")						
	Section	R: Indicate	AI TERNATIV	E Exam Date/	Time If Applica	hle·
Alt. Date	1		3	4	MIDTERM	FINAL
Alt. Time	1	2	3	4	MIDTERM	FINAL
Student Signature:				Instructor Signature: (Required for alternative time requests)		
×				×		
Section C: The following must be completed by INSTRUCTOR						
Submission information for the exam				Return information for the exam		
The exam will be:				The exam is to be returned by:		
□ Delivered: <u>North Bldg. Rm. 300</u>				☐ Will pick-up: North Bldg. Rm. 300		
☐ Emailed: <u>accesstesting@hunter.cuny.edu</u>				☐ Email:		
□Online						
Additional Notes/Comments/Instructions: (e.g., calculator use, formula sheet, etc.) Note: Only materials indicated will be permited during the exam						
, be perimted during the exam						
Facilitating Testing Accommodations is a shared responsibility amongst our office, students, and faculty.						
Ple	ase ensure d	our office rec	eives the exa	m within 48 ho	urs before the	exam date.

Testing Accommodation Form Guide:

Before filling out a **Testing Accommodation Form (TAF)**, you must share your accommodation letter with your instructors confirming your registration with the Office of AccessABILITY and the accommodation received.

When requesting testing accommodations, you must submit a Testing Accommodation Form (TAF) to the testing coordinators via email (@accesstesting@hunter.cuny.edu) or in person to North 300 within at least two-weeks before the exam date.

Late requests are not guaranteed and may require rescheduling.

TAF Checklist:

Please review this checklist before submitting your TAF to ensure you've taken the necessary steps.

□ Section A (Student)

- 1. Fill out your (student) information, including your name, EMPLID, contact information, and the course code of the course you are requesting accommodations for
- 2. Indicate <u>ALL</u> the course exam dates and the start time and length of the exam for the class (without calculating your extended time).

□ Section B (Alternative Time Request Only)

- 1. Only complete this section if you believe your exam will **conflict** with another class or will be outside our center's hours of operation.
- 2. **Discuss an alternate date and complete section B with your course instructor**. Once completed, ask your professor to provide their <u>signature</u> indicating approval. Alternative time requests will only be granted with professor approval and if an eligible time conflict is present.

□ Section C (Instructor)

- 1. Ask your instructor to complete this section, including how the exam will be submitted to the office and the completed exam's return information.
- 2. Instructors may provide any additional notes, comments, or instruction relevant to the exam.

□ Submit TAF to Access Testing Center

- 1. When you have completed Section A
- 2. Alternative Time Only (Section B) was completed by both you and your instructor
- 3. AND, Instructor has completed Section C

If you need further assistance filling out your TAF, schedule an appointment with one of our Testing Coordinators.