Binghamton University, Department of Mathematics and Statistics
Proctor Application

Section A. – To be completed by the student

1. Student Contact Information   Class _____

Name _____

Daytime Phone _____

E-mail _____ @binghamton.edu   B Number _____

2. Course Needing Proctor _____	**3.** Semester and Year: Summer/Winter 20__

Students need to submit their proposed proctor for approval. Students may refer to http://www.ncta-testing.org/cctc/find.php or other networks in order to find a proctor.

4. Fill in the proctor's name and organization (e.g. Orange County Public Library, Brevard Community College, etc.) and the Exam Information.

Proctor/Testing Center Name _____

Organization Name _____

Exam Date (mm/dd/yy) and Time _____

I, _____, agree to the following
       (1) to locate a proctor or testing center and set up an appointment for my course exam(s), according to published dates
       (2) to arrange for fee payment for the proctoring services, if any
       (3) to submit this form to the proctor for completion and to provide him/her the instructions.

The information in Section A is correct to the best of my knowledge.

_____
Student Signature   Date

Section B. – To be completed by the proctor or testing center director

1. Proctor/Testing Center Contact Information:

Proctor Name _____   Phone Number _____

Organization _____

Street Address _____

City _____   State _____   Zip _____

E-mail Address _____   Fax Number _____

2. I certify that; (1) To the best of my abilities, I will uphold the Binghamton University Academic Honesty Code (https://www.binghamton.edu/academics/provost/faculty-resources/honesty.html); (2) I have Internet access or email at the testing site that will allow me to download or receive pdf. files and print them. The information in Section B is correct to the best of my knowledge; (3) I will be available to serve as the proctor at the above time listed in Section A.

_____
Proctor Signature   Date