



Center for Access and Accommodative Services

Rooms A125, A137, and A141

Monday-Thursday 8:30-6:30 Friday 8:30-3:00

(708)456-0300 ext. 3917 and ext. 3636 caas@triton.edu

Testing Form

Exams to be taken at the CAAS must be accompanied by a completed Testing Form.

Today's Date _____ Student _____

Faculty _____ Phone/Ext. _____

Class Name and Section _____ Regular Class Time _____
Allowed for Test _____

Test or Quiz Name _____ Last Date Test
Can Be Taken _____

If test is not taken by this date do you prefer CAAS to:

Shred the test _____ Or Return the test to you _____ Room Number _____

Materials students may use for the exam. Circle all that apply:

Book Notes Calculator Dictionary Scratch Paper

Special Instructions: _____

How should the exam be returned to faculty?

____ Deliver to Faculty mailbox by CAAS staff to:
Bldg. Name _____ Room _____

____ Faculty will pick up test in the CAAS

____ Student will deliver test to faculty in a sealed envelope

Office Use Only

Equipment Allowed for Testing _____
(Circle Equipment Used)

Assigned Testing Location _____ Accommodative Testing Time Allowed _____

Testing Date _____ Proctor _____

Time Exam Started _____ Time Exam Completed _____

Entered in CAAS Database _____

Delivery Date _____ Staff Delivering _____

Faculty Pick-up Date _____

Student Pick-up Date _____

Date Recorded in Database _____ Staff Entering _____