



Proctor form for Term _____, year _____ OMGT Course # _____ Professor name _____

ProctorU is always the MSOM Graduate Program's preferred method of exam proctoring. However, a student can petition for a "live proctor" only under extenuating circumstances. **The proctor must send this form, completed in full, to Dr. Rich Ham, the associate director of the program at richardh@uark.edu for approval. The site coordinator will be copied when the request is approved.** The professor will be informed once the request is approved. It is the student's responsibility to secure and get approval for a live proctor each term if needed, but only when unavoidable due to deployment, lack of internet connectivity, etc. A new proctor form is needed if the student has a change in proctor.

Proctor Selection Requirements:

A proctor may be located at a testing center (fee may be required). A proctor may also be a training/ education officer of a Military Education Center, Corporate Training Department/Human Resources Office, local library, or college. **A proctor may NOT be a supervisor, friend, relative, or other person with identifiable conflict of interest.** It is the student's responsibility to follow-up with the proctor to: 1) ensure they have received the exam password and instructions from the course professor and 2) schedule exams.

Student's Name _____ **Phone** _____ **Student's Email** _____

Location (city/state/country) where exam will be proctored _____

Name of Proctor _____

Employer _____ **Job Title** _____ **Relationship to Student** _____

Company Address _____ **Office phone** _____

Proctor Email _____

Information on proctoring requirements:

The exam(s) will be transmitted to Proctor with exam dates (timeframe), time limits of actual testing and any other restrictions. The student is responsible for coordinating the exam with the proctor.

Statement of Understanding and Integrity by Proctor:

I certify these are **not** available first through official email: Live proctor service, ESO, orderly room, administrative officer, or additional duty ESO/equivalent first choice.

I certify that I am **senior in position rank and not a direct supervisor. I have no personal relationship with the student.**

I hereby agree to proctor tests taken by the above named student. I will carefully review the instructions provided by the professor and will certify that I observed the student during testing and ensured that the integrity of the test was maintained during each exam I proctor. I will ensure that tests will be administered according to professor's requirements, i.e.: open or closed book; calculators or not; no internet windows open other than Blackboard via the official University of Arkansas web site; within allotted time; with no assistance from others, etc.

I understand that the passwords for test access will be sent to my attention via email and that I am to ensure that they are held confidential until the test is administered. I will terminate the test at the end of the specified time. (If Blackboard access is not available due to geographic location of the student and proctor, I will scan/email or fax the exam as instructed on the email message accompanying the exam.)

If required to use a paper exam, I will maintain the exam materials in a secure place prior to the test and then will keep a copy of the completed exam until grades are reported and confirmed. I will never return the completed test to the student. I will never ask student to assist in faxing or returning the test and understand to do so will result in the failure of the student.

Proctor's Signature: _____

Date signed _____

Please note: Students must submit a new proctor form each term if needed!