

Test Contract Page

Weber State University Testing Services

Please fill out this form and return it to the Testing Center where you are requesting testing services. For questions or concerns please visit us at www.weber.edu/testing

Test Information

Course and Test Name: (e.g. Math 1080 Exam 3) _____

Instructor's Name: _____ **Section Number(s):** _____

Number of Tests Being Submitted: _____

Beginning Date: __M__ / __D__ / __Y__ **Ending Date:** __M__ / __D__ / __Y__

Test Type: (Please Circle One) Scantron / Paper / Supplemental Sheets

Time Limit: Yes / No **Time Allowed:** Hours _____ Minutes _____

Special Instructions

Number of Tests at other Centers:

Student Services _____ Social Science _____ Science Learning _____ Davis _____ West _____

Testing Aids: (Please Check)

Materials:

- € Scratch Paper
- € Open Book
- € Ruler
- € Note Card:
____ Size
- € Notes:
____ Pages

Dictionary: Paper

- € English Dictionary
- € Foreign Dictionary

Restroom break:

- € One Restroom Break
- *Please note that by allowing a restroom break, the instructor waives test security. The Testing Center will retain ALL tests and materials, during this time.

Calculator:

- € Four Function Calculator
- € Scientific Calculator
- € Financial Calculator
- € Graphing Calculator
- € Other: (Please Specify)

Testing Center Use Only

Date Received: __M__ / __D__ / __Y__

Confirmation Number: _____

Receiver's Name: _____

Entered in Chi by: _____

Official Exam Parameters Modification:

Modified By: _____

Date: __M__ / __D__ / __Y__

Official Exam Parameters Modification:

Modified By: _____

Date: __M__ / __D__ / __Y__

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Communication

Between Testing Staff and the Instructor only

Preferred form of Communication:

- € Office: _____
- € Home: _____
- € Cell: _____
- € Email: _____
- € Other: _____

Reports and Scoring

Student Feedback:

- € No Feedback
- € Score and Percent
 - Immediately
 - After Test Run
- € Questions Missed
 - Immediately
 - After Test Run
- € Correct Answers
 - Immediately
 - After Test Run

Scoring options:

Unless indicated below each question and question weight will be equal to 1 point
(e.g. a 50 question test will be worth 50 points)

Number of Questions:	Item Weight:	Maximum Score:
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Question Weights and Bonus Questions

Numbers	Item Weight	Bonus
to		Yes / No
to		Yes / No
to		Yes / No
to		Yes / No

Authorized Individuals who can pick up finished exams: (Valid I.D. Required)

Name: _____ Name: _____

Name: _____ Name: _____

Tests Picked Up: _____ to _____ Date: / / Initials: _____ T Initials: _____

Tests Picked Up: _____ to _____ Date: / / Initials: _____ T Initials: _____

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Tests Picked Up: _____ to _____ Date: __M__/_D__/_Y__ Initials: _____ T Initials: _____

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