

Laney College Student Accessible Services 900 Fallon Street • Oakland, California 94607 Tel. (510) 464-3563 Fax . (510)986-6927

## ALTERNATIVE TESTING REQUEST FORM

Name		1.0	)#		Email A	Address		
Course Title (e.g. ENGLISH 1A)					Ins	structor		
Date of Exam (test proctor roc	om)			Tim	e I will sta	art test		
		Check All	Approve	d Accon	nmoda	tions		
☐ Extra Testing Tin	ne 🗌 1.5 x s	tandard		2 x standar	d	Distracti	on-reduced ro	om
Computer	Basic C	Calculator		nlarged Pr	int	Scan-and	d-read Softwar	re (Kurzweil)
Other (Specify)								
Student Signature						Phone Number		
	* NOTE: Your signate to the SAS test	st-taking policies	s printed on p	olicy and pr	ocedures	form.		
INSTRUCTOR	(COMPLETE AND Ret							
Date of Exam ( IN CLASS	)	Start Time	e (IN CLAS	S)		Time Allowed (	IN CLASS)	
	TES	T PARAMET	ERS (che	eck only t	hose ap	oplicable)		
Open Book	Title of text				Scantro	on [	Blue Book	
Open Notes	Type/ amount				Dictiona	ıry	Thesaurus	
Calculator?	☐ Basic	Scien	ntific		Graphi	ing		
Other (specify)								
	•	TEST DELIV	ERY AND	RETURN	OPTIO	NS		
DELIVERY OPTIONS	☐ Instructor will	deliver to SAS	Center	In:	structor w	vill email to laneysa	sassessment	@peralta.ed
	Student will o	deliver (sealed	envelope)	to SAS Ce	enter			
RETURN OPTIONS	Test Proctor v	vill email exam	to Instructo	r $\square$	Test p	roctor will return te	est to SAS Cei	nter
	Instructor will pick	up from SAS	Center (E	-251)				
Instructor Signature					Email			
					Phone			