

Online Exam Coversheet

PLEASE PRINT CLEARLY

Name of Instructor: _____

Phone Number: _____

Instructor Email: _____

Department Name: _____

Exam Information

Course Number and Section: _____

Course Name: _____

Test Name (Test 1, Test 2, Midterm, etc.): _____

Time Limit (not to exceed 2 hours): _____

First day student may take test: _____

Last day student may take test: _____

Exam aids:

Password (case sensitive/only required for exams placed within Canvas):

Special Instructions:

Student Name(s):

Proctor: _____

Date: _____

Time Testing Started: _____

Time Testing Ended: _____