

# Application for Use of Testing Room

**Today's Date:**

**Name of Patron or Guest User:**

**Address:**

**Phone:**

**Email:**

**Testing Website:**

**Proctor:**

**Date and Time of test:**

**Needs (utensils, paper, headphones, etc.):**

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*I have read and agree to the Proctoring Policy.*

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Printed Name**  
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**Request Received By (library staff):**

**Director's signature of approval:**  
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