UNIVERSITY OF NEW ENGLAND

CONTRACT OF AGREEMENT FOR TESTING ACCOMMODATIONS

I, _____, agree to the following terms and conditions for test accommodations through the UNE Portland Campus DS Office.

General Information

* I will meet early in each semester with every instructor/course director with whom I will be using my test accommodations. I will discuss my registration with DS and my approved test accommodations. If my instructor can provide me with the test accommodations that I have been granted, I should take my tests under the instructor's supervision. I will discuss all contingencies that may occur to include regular, midterm and final exams and quizzes.

* If my instructor or department cannot provide me with the proper accommodations, I will need to access the services provided through UNE's Portland Campus DS Office, located in the lower level of Ginn Hall. The DS Office is open Monday - Friday 8-4:30, except during University holidays and can be reached at 221-4550. It is my understanding that I need to speak to a DS staff in person, over the phone, or via email to schedule an exam. Every attempt will be made to schedule my exam on the same day and time as scheduled in the classroom. This may not always be possible due to the volume of exams and various scheduling conflicts.

* I **must** provide the DS a copy of my **exam schedule** early in every semester with the courses noted in which I will be using my test accommodations outside the supervision of the instructor/course director.

Scheduling Policy

* I understand that it is my responsibility to schedule all of my exams in person, over the phone, or via email with DS Office staff. The following guidelines are the minimum standards to obtain service from the DS Office.

* Regular Exams - To schedule an exam requiring extra time only, it is necessary to notify the DS Office at least **three** business days in advance. Exams requiring the use of a computer must be scheduled at least **five** business days in advance.

* Mid-Term and Final Exams - To schedule an exam requiring extra time only, it is necessary to call the DS Office at least **seven** business days in advance. Exams requiring the use of a computer must be scheduled at least **ten** business days in advance.

* I understand that it is my responsibility to notify the DS Office within **three** business days of any date or time changes. If I decide not to utilize the DS Office services for a particular exam I will notify them as soon as possible.

* I understand that if I do not meet these deadlines, it is my responsibility to make individual testing arrangements with my instructor.

Miscellaneous

* I understand that if I arrive more than 20 minutes late for a scheduled exam, the DS Office may not administer the exam. I will need to speak with my instructor about rescheduling the exam (in accordance with DS Office deadlines). If I begin my exam late (up to 20 min.), the number of minutes may be deducted from the time allotted for the exam. I will still need to complete my exam by the originally scheduled completion time.

* I understand that I must abide by the University's Student Code of Conduct in all my dealings with the DS Test Center. If I am caught cheating or suspected of cheating on an exam by DS Office personnel/test proctor, full information regarding the incident will be turned over to the instructor for discretionary action.

* I understand that I cannot leave the testing area without permission from a proctor.

* I understand that this contract does not explicitly cover every aspect of the DS Test Center policy and procedure.

Student Signature

Date

DS Office Personnel

Date