



CONTRACT OF AGREEMENT FOR TESTING ACCOMMODATIONS

I, _____, agree to the following terms and conditions for test accommodations through the UNE DS Test Center.

General Information

* I will meet early in each semester with every instructor with whom I will be using my test accommodations. I will discuss my registration with the 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 can't provide me with the proper accommodations, I will need to access the services provided through the DS Test Center, located in the lower level of Stella Maris Room 130. The DS Test Center is open Monday - Friday 8-4:30, except during University holidays and can be reached at EXT.2119. I understand that if there are extenuating circumstances (evening classes, scheduling difficulties) these hours may be altered with advanced notice. I need to speak to an DS staff in person or over the phone 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 course schedule early in every semester with the courses noted in which I will be using my test accommodations outside the supervision of the instructor. The DS will complete a *Request for Test Accommodations* for each course. The *Request for Test Accommodations* form will contain information about your test accommodations, DS Test Center procedures and the test transportation preferences of my instructor. **I am responsible for** 1) Picking up the *Request for Accommodations* form from the DS; 2) Getting the instructor to read and complete their portion of the *Request for Test Accommodation* and 3) Returning the completed *Request for Test Accommodations* to the DS. Before I can access the DS Test Center a completed and signed *Request for Test Accommodation* form must be on file for each course..

Scheduling Policy

* I understand that it is my responsibility to schedule all of my exams in person or over the phone with DS Test Center staff. The following guidelines are the minimum standards to obtain service from the DS Test Center. I am strongly encouraged to schedule my exams as early as possible.

University of NEW ENGLAND

* Regular Exams - To schedule an exam requiring extra time only it is necessary to call the DS Test Center at least three business days in advance. Exams requiring the use of the Quiet Room, readers, scribes or computer access 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 Test Center at least seven business days in advance. Exams requiring use of the Quiet Room, readers, scribes or computer access must be scheduled at least 10 business days in advance.

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

* I understand that it is my responsibility to notify the DS Test Center if exams are canceled dates' change or if I decide not to use the DS Test Center for a particular exam.

Miscellaneous

* I understand that if I arrive more than 20 minutes late for a scheduled exam, the DS Test Center cannot administer the exam. I will need to speak with my instructor about rescheduling the exam (in accordance with DS Test Center deadlines). If I begin my exam late (up to 20 min.), the number of minutes will 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 a student is caught cheating or suspected of cheating on an exam by DS Test Center personnel, 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 and without signing out. Upon returning I will notify the proctor and sign back in.

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

Student Signature

Date

DS Test Center Personnel

Date