



## EXAM COVER SHEET

STUDENT NAME \_\_\_\_\_

Date and time that test must be taken on: \_\_\_\_\_

Scantron color \_\_\_\_\_

**This box to be used by the Office of Academic Services**

**Date Test Received:** \_\_\_\_\_

**Date Exam Taken By:** \_\_\_\_\_

**Time Left:** \_\_\_\_\_

**Notes:** \_\_\_\_\_

COURSE \_\_\_\_\_

FACULTY \_\_\_\_\_

PHONE \_\_\_\_\_

**Time Limit** \_\_\_\_\_

If not taken, test will be returned the same week.

[tbates@kent.edu](mailto:tbates@kent.edu) 44255

ACCOMMODATIONS:

**Extended time:** \_\_\_\_\_

**Special notes:** \_\_\_\_\_

**Calculator:** \_\_\_\_\_

### CHEATING POLICY:

I am aware of and understand the Kent State University Administrative **Policy regarding student cheating and plagiarism** (Policy Register 3342-307). Which states students must perform their academic work according to the standards set by Kent State University at Ashtabula; **therefore, if cheating occurs appropriate sanctions will be applied at the discretion of the instructor.**

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**No cell phones, book bags or water bottles and or other drinking apparatus. You may **Not** leave this testing area. The only items allowed in the testing area, are the items written by your Instructor in the accommodations box.**

ALL BOOKBAGS, NOTEBOOKS, COATS/JACKETS AND PURSES ARE TO BE LEFT ON THE BACK WALL. YOU ARE **NOT** TO HAVE YOUR **CELLS** PHONES OUT. THEY ARE TO BE ON THE TABLE IN THE BACK OF THE ROOM.