

DANIEL BOONE REGIONAL LIBRARY

Request for Test Proctoring

Individuals seeking to have a test proctored at any of the service centers of the Daniel Boone Regional Library will need to complete this form. A librarian will contact you within a week.

Today's date: _____

Name: _____

Phone number: _____

E-mail address: _____

Name of the
School/College: _____

Class name: _____

Number of tests: _____

Will the test(s) be written
or on the computer? _____

What is the deadline for
taking this test? _____

Date and time you wish
to take the test? (Include
3 options) _____

For staff use only: