

## Proctoring Service Verification Form

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Proctor name: Last: \_\_\_\_\_, First: \_\_\_\_\_

Proctor signature: \_\_\_\_\_ (date) \_\_\_\_\_

UFID: \_\_\_\_\_

Course: \_\_\_\_\_

Exam Date: (month/day/year) \_\_\_\_\_

Number of exam periods (check):

1 period: \_\_\_\_\_

2 periods: \_\_\_\_\_

Other: \_\_\_\_\_ (hr)

Instructor: \_\_\_\_\_

Instructor signature: \_\_\_\_\_ (date) \_\_\_\_\_

**Student instructions:** 1-Complete this form. 2-Have the instructor verify your service as a proctor by signature. 3-Take the form to Mary Ann Soncrant in the Microbiology & Cell Science main office for entry into the payroll system.