



Main Campus  
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Wilburton, OK 74578  
918.465.2361

McAlester Campus  
1802 East College Ave.  
McAlester, OK 74501  
918.426.5272

SE McCurtain County Campus  
2805 N.E. Lincoln Rd.  
Idabel, OK 74745  
580.286.9431

Antlers Site  
405 SE "O"  
Antlers, OK 74523  
580.271.0471

www.eosc.edu

TDD# 800.522.8506

# Proctor Agreement Form

TO BE COMPLETED BY THE STUDENT

This form must be completed and returned by the date your instructor indicates and BEFORE an exam can be distributed and/or administered. Proctors cannot be co-workers or subordinates, family, friends, personal tutors, or anyone with a potential conflict of interest. Eastern Oklahoma State College reserves the right to verify and deny any proctor for any reasons we deem necessary with the goal of ensuring academic integrity. Review the course syllabus to determine if exams are to be proctored and to review our Academic Ethics Policy.

Your instructor will send an email with instructions, a password and /or paper exam to the designated proctor as soon as they are made available. The student is responsible to schedule a time with a proctor to take the exam. Be sure to compare the proctor's schedule with the time(s) that your instructor has made the exam available.

Student's Name: \_\_\_\_\_ EOSC ID # \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Course/ Course number / Instructor: \_\_\_\_\_  
(ex: College Algebra /MATH-1513 / Sorrell)

Semester: SU \_\_\_\_ yr      FA \_\_\_\_ yr      SP \_\_\_\_ yr      (ex: SU '17, FA '17, SP '18)

\*\*Are you proctoring at an EOSC site? Check one: Wilburton \_\_\_\_ McAlester \_\_\_\_ Idabel \_\_\_\_ Antlers \_\_\_\_

**IF YOU ARE PROCTORING AT AN EOSC SITE, this form is complete. Please submit this to your professor.**

IF NOT, and you are proctoring off-campus, you must have your off-site proctor fill out the bottom half of this form.

TO BE COMPLETED BY THE OFF-SITE PROCTOR

I agree to serve as the off-site proctor for examinations to be administered to the individual whose name and student information appear above, or for all students who are on attached list (please type or print each student's name, student ID #, email and phone number). I will carefully review [Eastern's academic policies and procedures](#) and the instructor's guidelines for administering each exam (Testing Center Checklist for each test will be sent from each instructor). I understand that the exams are to be sent to my attention and that I am to ensure they are held confidential. **I also verify that the academic integrity of these examinations will not be compromised.**

Name of Proctoring Institution: \_\_\_\_\_

Proctor Contact Name & Title \_\_\_\_\_

Business Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email (business email only): \_\_\_\_\_ Relationship to student: \_\_\_\_\_  
(Co-worker, subordinate, family, friends, etc. are not permitted)

\_\_\_\_\_ (Proctor Signature) \_\_\_\_\_ (Date)

\*\*Eastern reserves the right to verify a proctor's identity, require proof of eligibility, or require selection of a different proctor. The Proctor Agreement may be terminated by instructor, student, and/or proctor by providing written notification to all parties involved. **STUDENT MUST SHOW PHOTO ID VERIFICATION WHEN TESTING.**

**THIS FORM IS TO BE EMAILED BY YOU, the off-site proctor, to [proctor@eosc.edu](mailto:proctor@eosc.edu) with 'Proctor Agreement Form' in the Subject Line please. If you have any questions, please send these via the [proctor@eosc.edu](mailto:proctor@eosc.edu) email address as well. Thank you.**