

**Alternate Testing Pass Form**  
**Student Success Center – 117 Thompson Hall**  
**(843) 953-5305 or [sscenter@citadel.edu](mailto:sscenter@citadel.edu)**

Professors, please complete and send this form to the Student Success Center along with the test.

**How will the test be delivered to The Student Success Center?**

- By the student (in a sealed envelope)  
 By the professor or an academic department designee  
 By e-mail to the Student Success Center ([sscenter@citadel.edu](mailto:sscenter@citadel.edu))

**Student's Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_

**Student's CWID #:** \_\_\_\_\_ **TEST # (i.e., #1, final, etc.):** \_\_\_\_\_

**Professor Name:** \_\_\_\_\_ **Course (ENGL-102):** \_\_\_\_\_

**How long does the class have to take the exam?:** \_\_\_\_\_

**Deadline Date for Taking the Test:** \_\_\_\_\_

**Please indicate what materials the student is allowed to use on this test:**

- Scrap Paper       Open Book       Open Notes  
 Calculator       Formula Sheet       Blue Book  
 Dictionary       Scantron – Please include a scantron sheet with the test if one is needed.

Use Computer (Specify Program): \_\_\_\_\_

Other Items (List): \_\_\_\_\_

Special Instructions: \_\_\_\_\_

**How will the test be returned to the professor?**

- By the student (Specify where to return the test): \_\_\_\_\_  
 Professor or designee will pick up from the Student Success Center  
 Scanned and emailed to professor by Student Success Center staff  
 Shred original       Save original to be picked up

**Please note that tests will not be returned via campus mail.**

**Professor Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

For Office Use Only: Test Length: \_\_\_\_\_ Sealed by: \_\_\_\_\_

Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_ Sealed Time: \_\_\_\_\_

Revised 12/20/21