

Distance Learning Faculty Request Form

Faculty members are encouraged to submit requests within the first two weeks of the semester. Please complete the form and submit to Testing Services.

FACULTY/COURSE INFORMATION

Name _____

Phone _____

Course title _____ Subject/Course# _____

Email address _____

SCHEDULED EXAM DATES AND DURATION

Semester _____

Exam 1 date _____ Duration _____

Exam 2 date _____ Duration _____

Exam 3 date _____ Duration _____

[SUBMIT FORM](#)

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