

LOUTIT DISTRICT LIBRARY
EXAMINATION PROCTORING POLICY

STATEMENT OF POLICY

In response to a community need, Loutit District Library will provide proctoring services for academic examinations.

REGULATIONS

1. Proctoring is free for Loutit District Library cardholders. Patrons from other libraries will be charged \$10.00 per test.
2. The student must contact a Reference Librarian to request proctoring service before any examination is sent to the library. The library requires the student's contact information at that time.
3. The student is responsible for having the examination and instructions sent to the library after talking with a Reference Librarian. The student is responsible for the timely receipt of the examination and instructions.
4. The library will accept examinations in person, online, or via postal service.
5. The library reserves the right to refuse proctoring if the requirements exceed staff or facility capabilities.
6. The testing date and time must be agreed to by a Reference Librarian and will occur during regular library hours and should not exceed four hours. If the student fails to comply with the agreed-upon test date and time, a librarian may return the examination to the sender. Tests missed without notice will not be rescheduled.
7. Supply requirements for an examination are the responsibility of the student as well as stamped envelopes for exams or signed forms that need to be returned by mail.
8. The library does not guarantee a quiet test area, continual monitoring for the entire examination period or a specific library staff member's service.
9. Library staff is responsible for delivering the completed examination into the care of the US Postal Service, or for delivering it online via email or another electronic submission process, but is not responsible for delivery beyond that point.
10. Examinations not taken prior to exam deadline will be discarded.

Originally adopted: February 3, 2015
Revised: April 3, 2018

**LOUTIT DISTRICT LIBRARY
PROCTORING REQUEST FORM**

Student Information

Last Name: _____

First Name: _____

Library Card Number: _____

Email: _____

Phone Number: _____

Name of Educational Institution: _____

Class/Course Name: _____

Instructor's Name and Contact Information: _____

Preferred Date and Time for Exam

	Date	Time
First Choice		
Second Choice		

Length of Exam: _____ hours Written: _____ Online: _____

I acknowledge that I have read and understand the Loutit District Library Examination Proctoring Policy and that I agree to its terms.

Student's Signature Date

Staff Initials Date

STUDENT INFORMATION

LIBRARY HOURS

Monday-Thursday 9AM-9PM
Friday 9AM-6PM
Saturday 9AM-5PM
Sunday - School Year 1PM-5PM
Sunday - Summer CLOSED

LIBRARY ADDRESS

407 Columbus Ave.
Grand Haven, MI 49417

LIBRARY PHONE

616.842.5560

PROCTORING CONTACT

Head of Adult Services
loutit@loutitlibrary.org
616.842.5560 x214