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Student/Proctor Agreement Form for Non-Cameron Locations

This form is **only** for students taking proctored exams at a physical locations such as a Non-Cameron testing center, a military Education Center, or with a High School Counselor (for Concurrent students only). If you are taking proctored exams at Cameron University, or with ProctorU, **this form is not needed**.

*Email the completed form to: TestingCenter@cameron.edu

| Student Information (To Be Completed By Student) | |
|--|----------------|
| Name: | |
| Phone Number: | Cameron Email: |
| Course(s) Requiring Proctored Exams: | |

Any student found guilty of academic dishonesty will be subject to disciplinary action. Examples of academic dishonesty, include but are not limited to the following:

- *Copying from another student’s test paper, laboratory report, other report, or computer files, data, and/or programs;*
- *Using materials not authorized by the professor or instructor;*
- *Collaborating with another person without authorization during an examination or in the preparation of academic work;*
- *Knowingly and without authorization, using, buying, selling, stealing, transporting, soliciting, copying or possessing in whole or in part, the contents of an examination or the work of another student;*
- *Substituting for another student, or permitting another student/individual to substitute for oneself in taking an examination or preparing academic work;*
- *Attempting to bribe another person to obtain an examination or information about an examination;*
- *Attempting to bribe any faculty/staff or student to alter a grade.*
- *Plagiarizing: To plagiarize is to “pass off ideas or words of another as one’s own created production without crediting the source; to present as new and original an idea or product derived from an existing source.” (Webster)*
- *Any forgery, alteration, or misuse of academic documents, forms, or records.*

| | |
|----------------------|-------|
| Student’s Signature: | Date: |
|----------------------|-------|

| Proctor Information (To Be Completed By Proctor) | |
|--|---|
| Name: | |
| Title: | |
| Office Phone Number: | Email where Exam Instructions should be sent: |
| Testing Location Mailing Address: | |

Please select from the following to confirm that you are:

- A college or university testing center proctor
- An educator: state certified teacher or counselor (This option is for high school concurrent students only)
- Military superior
- A librarian
- A test administrator at a professional testing center

I agree that the student(s) I proctor are not related to me, are not directly employed by me (nor am I directly employed by them) nor do we work in the same office/department. I agree to personally administer the test(s) to the above student, and I will adhere to the guidelines provided to me by the instructor. I will not leave the student unsupervised during the exam administration. I further understand that any associated fees for proctoring services should be disclosed to the student at the time they schedule. I will personally enter the password provided for the exam at the agreed testing time and place only. Proctors must administer and supervise the exam in a professional setting.

I agree that I have read and understand Cameron University’s guidelines concerning the administration of examinations.

| | |
|----------------------|-------|
| Proctor’s Signature: | Date: |
|----------------------|-------|

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