



**PALOMAR
COLLEGE**
Math & Science
Learning Center

Make-up Test Form

Student's Name: _____

Class/Course Title: _____

Instructor's Name: _____

Earliest Start Date/Time: _____

Latest Start Date/Time: _____

(The test will not be administered after this date)

Student may use the following (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> Scientific Calculator | <input type="checkbox"/> Computer |
| <input type="checkbox"/> Graphing Calculator
Not capable of symbolic
manipulations etc. (non-CAS) | <input type="checkbox"/> Graph Paper |
| <input type="checkbox"/> Graphing Calculator Capable of
Symbolic Manipulations (CAS)
such as TI-89, TI-92, etc. | <input type="checkbox"/> Blue/Green Book |
| <input type="checkbox"/> No Calculator | <input type="checkbox"/> Scratch Paper Number of sheets _____ |

Note: Students may NOT use their own paper. Students may NOT use their cell phone, camera, PDA, or any other electronic devices during testing. They may NOT use MP3 or iPod players, or any other personal music system. Students may NOT take the exam out of the Math and Science Learning Center.

Warning: This exam is being monitored via a video monitoring system.

Time limit: Yes No Time Allowed _____

Other directions: _____

Students please read and sign the following before beginning the exam.

I have read, and I understand the instructions for taking this make-up exam. I also understand that there may be a time limit on this test, and it is my responsibility to turn the test in on time. I understand that I must turn in my test, all scratch paper (if allowed), and this form to the assistant at the testing desk.

Student's Signature: _____

Date: _____

Time In: _____

Time Out: _____