



Paper-Pencil Test (PPT) Request Form

Student Name :

Last

First

M.I.

Rocket #:

I understand that any misconduct may cause dismissal or other consequences.

Instructor Name :

Course

Alphanumeric :

Instructor Phone:

Please indicate below W K L V V W ~~U R G~~ W U U

EXAM INSTRUCTIONS:

Exam Deadline:

AIDS/INSTRUMENTS (mark if allowed):

Open book

Open notes

Scratch paper/
Blue book

Calculator (specify model/type): _____

Testing Center Use