

**\*All proctor forms are subject to verification**

**INTERNATIONAL PROCTOR STATEMENT**

**Student Information**

Name \_\_\_\_\_ CWID \_\_\_\_\_

**Proctor Information**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Employer \_\_\_\_\_ Title \_\_\_\_\_

Email Address \_\_\_\_\_ Telephone \_\_\_\_\_

ONLY an official university testing center may serve as a proctor. *Email addresses cannot be personal emails (Yahoo, Gmail, AOL, etc.) but must reflect the university's web domain. Email addresses are not sufficient as verification.*

Does the proctor know the student? If so, how does proctor know this student? *(co-workers, supervisors, friends, students, family, personal tutors, or anyone with a potential conflict of interest will NOT be approved).*

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I acknowledge that as a proctor for the student named above I am accepting the responsibility of insuring the academic integrity of Oklahoma State University (<http://academicintegrity.okstate.edu/>). I am neither related to the student named above, nor do I have a conflict of interest in serving as a proctor. A conflict of interest includes any relationship with the student that could affect the academic integrity of the testing process. I understand that failure to identify such conflicts may result in the student receiving a charge for a violation of Oklahoma State University's academic integrity policy and a grade of "F!" for the course.

I agree to personally administer the test(s) to the above named student and I will not leave the student unsupervised during the exam administration. I will carefully review the guidelines for administering each test and will certify that each test was administered in accordance with the guidelines supplied. I further understand that this is a voluntary nonpaying position unless arrangements are made between the student and proctor. I agree to personally submit the test to Oklahoma State University pursuant to the policies of the CEAT Distance Education Office and course instructor. I understand that the tests and final examination are to be sent to my attention and that I am to ensure that they are held confidential. I agree to verify proof of student identification, to monitor the examination, and verify that the academic integrity of this examination is not compromised. I will collect the test at the end of the specified time and return according to the instructions received with the test. I will store the completed test in a secure location until the end of the semester, at which time I will shred/destroy the test.

By signing this agreement, I represent that the above information is correct.

Proctor Name (Signature) \_\_\_\_\_

Proctor Name (Printed) \_\_\_\_\_ Date \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Return this form to:

Pam Moore, OSU Engineering Distance Education  
101 Engineering North, Stillwater, OK 74078-5023  
Phone: 405-744-5146, Fax: 405-744-5033  
Email: [pam.moore@okstate.edu](mailto:pam.moore@okstate.edu)  
Web: [ceatde.okstate.edu](http://ceatde.okstate.edu)