

NCSI Medical Coding Program PROCTOR INFORMATION FORM

STUDENT NAME:		STUDENT ID:	
MODULE:	COURSE	S:	
PROCTOR INFORMATION (Please see list of acceptable proctors	5.)		
AME: POSITION/TITLE:			
BUSINESS/LIBRARY/SCHOOL NAME:			
BUSINESS ADDRESS:			
CITY: STATE:		ZIP:	
PHONE NUMBER (During Business Hours):			
EMAIL ADDRESS:			
NOTE: The proctor's email address <u>must be a business email ac</u> in order to receive exam instructions and proctor rules.	ddress. Th	he proctor must have an email address	
As all exams are online, please verify that you will be able to pro	octor onli	ne exams: O Yes O No	
To be read and signed by the proctor.			
• I do hereby agree to administer the exam to the studen	nt listed at	pove.	
• I will also adhere to the specific proctor rules, which will	ll be provi	ided with each exam.	
• I agree to provide the student with a quiet, distraction-free environment for taking exams and to verify the identity of the student with a valid photo ID.			

• I agree to provide adequate security of password information for proctored online exam.

PROCTOR'S SIGNATURE:	_ Date:	
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Suitable Proctor	Verification to Submit W/ Form
A full-time member of the teaching faculty or an educational administrator or staff of any regionally accredited institution of higher education.	Submit a photocopy of the front cover of the institution's directory or catalog and the page that lists the proctor's name and title.
A full-time, state-certified elementary or high school teacher or school librarian.	Submit a letter on official letterhead from the individual's principal or superintendent verifying his or her position.
Any educational administrator who holds a position similar to a high school superintendent, supervising principal, principal, or an Intermediate Unit administrator whose name appears in the institution's directory or catalog.	Submit a page from the directory or catalog showing the proctor's title, as well as the institution's name.
A currently employed public librarian who holds a library science degree.	Submit a letter written by this individual's supervisor on official letterhead from the library system in which he or she is employed.
A corporate staff member who holds a higher rank than the student <i>in the corporation where the student</i> <i>is employed.</i>	Submit a letter on corporate letterhead from the proctor's supervisor verifying employment at the company and listing the proctor's title and position.
An individual who is an active member of the clergy or a Youth Pastor.	Submit a letter on official letterhead from the person's administrative governing unit verifying the individual's employment and listing the proctor's title and position.
A government employee of higher rank than the student in the same government agency where the student is employed.	Submit a letter on official government letterhead from the proctor's supervisor verifying the individual's employment and listing proctor's title and position.
ARMED FORCES PERSONNEL: Any commissioned officer of higher rank than the student, a base commander, a noncommissioned officer in command of a military post, an education officer, or a base librarian.	Submit a letter on official letterhead from the base commander (or an authorized representative) verifying the proctor's position.