

MOHAWK COLLEGE

Distance Education / OntarioLearn

PROCTOR INFORMATION FORM

You must live more than 100 km from the College to use a proctor!

PLEASE PRINT - USE ONE PROCTOR FORM FOR EACH EXAM

Student's Name (last):	(first) _	
Student I.D. #:	Telephone: ()
Address: (street)		
		(postal code)
Course Name:		
Course Number:	Email Address:	
IMPORTANT Date Exams to be Written (m		
Proctor Information		
Testing Centre Contact Name:		
Name of College/University:		
College/University Address:		
(City)	(province)	(postal code)
Business Phone #: ()Business Email address:		
follows: I am a teacher or	administrator at a commu t problems, I am not a rela	chawk College's Proctor Policy as unity college or university and to ative, friend, neighbour, co-worker ddress of the student.
** Any fees char	ged by proctors are the stu	dent's responsibility **
Exam n	nust be written in an educat	ional setting.
Date:		
Proctor Signature:	Student Sigr	nature:
PLEASE FORWARD TO: Mohawk College, Online Learnin		

Mohawk College, Online Learning, Continuing Education 135 Fennell Avenue West, Hamilton, Ontario L9C 0E5 Please scan and email your proctor form to exams@mohawkcollege.ca QUESTIONS? 905-575-2154