



## PROCTOR DESIGNATION FORM

<b>School Name:</b>	
<b>Testing Liaison Name:</b>	
<b>Testing Liaison Email:</b>	

I authorize the persons named below to administer competency exams offered by the CareerTech Testing Center on my behalf. I attest that the individuals below **are not** instructors (except as outlined below) and understand that instructors in most cases **cannot** be involved in the testing process. I understand that exam security is very important and that individuals who compromise the content of CTTC exams will be held responsible for all costs associated with development of new test items:

Instructors can only proctor the following exams and can only proctor exams that are not related to their area of instruction:

- |  |   |
|--|---|
| <ul style="list-style-type: none"> <li>-- Financial Literacy</li> <li>-- Workplace Readiness Skills</li> <li>-- Job Seeking &amp; Retention Skills</li> <li>-- Introduction to Agriscience I</li> <li>-- Agriscience II</li> </ul> | <ul style="list-style-type: none"> <li>-- Fundamentals of Technology</li> <li>-- FACS Basics – End of Instruction</li> <li>-- FACS Basics – Semester A</li> <li>-- FACS Basics – Semester B</li> <li>-- Surviving &amp; Thriving</li> </ul> |
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<b>Testing Liaison's Signature</b>	
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By attaching our signatures below, we attest we **are not** instructors (except as outlined above) and understand that in most cases instructors **cannot** be involved in the testing process. We understand that exam security is very important and that individuals who compromise the content of CTTC exams will be held responsible for all costs associated with development of new test items.

Printed Name	Signature	Area(s) of Instruction (if applicable-only for Instructors)	Area(s) to be proctored (if applicable-only for Instructors)