



Harris College of Nursing & Health Sciences

Nursing

Student Acknowledgement Form: Remote Testing Protocol

I (print/type your name) _____ acknowledge that I have received and reviewed this document which provides instruction on the remote proctoring program (Brightspace/ D2L LockDown Browser with Respondus Monitor) to be used in this course.

Please initial each statement below and sign where indicated:

_____ I acknowledge the protocol and will abide by each of the statements therein.

_____ I understand that failure to follow the designated protocol during remote proctoring for my exam may be considered in breach of the protocol, which may result in my exam being deemed invalid.

SIGNATURE: I indicate by my signature below that I have read the terms and conditions of this protocol, and acknowledge that I understand it. My signature below indicates that I have read and freely signed this agreement, which takes effect as a sealed instrument.

Student Signature (Electronic Signature Accepted)

Date

Learning to make a difference!