



## TEST ACCOMMODATION REQUEST FORM (TARF)

This form must be submitted at least 4 school days before the exam.  
For final exams, TARFs must be submitted two weeks before the start of finals.

Students complete **Section A** of this form. Instructors complete **Section B**.

Submitting TARF: Email to [dssproctor@swccd.edu](mailto:dssproctor@swccd.edu) OR

For Chula Vista campus classes: return to the DSS Test Proctoring Office, Room 26-102 OR

For Higher Education Center classes: return to the Student Services Counter at that campus

**Email: [dssproctor@swccd.edu](mailto:dssproctor@swccd.edu) Phone: 619-421-6700 ext. 5271**

### Section A (completed by student)

Last Name	First Name	M	SWC ID	Date
Contact Phone	Course & Section			
DSS Specialist				
Class Location	Chula Vista	National City	Otay Mesa	San Ysidro

### Section B (completed by instructor and returned to the student)

1. Instructor Name Phone/Ext
2. Exam Date Exam Time AM PM
3. The amount of time the class will have to take the exam: HOURS MINUTES
4. Student may take the exam school days *before* or school days *after* the exam date.
5. Check materials that may be used in the proctored setting:
 

Books	Calculator	Computer	No Materials Allowed
Class Notes	Spell Check/Dictionary	Other	

6. Other Instructions:

7. EXAM DELIVERY:

If the class is held at the Chula Vista campus, deliver the exam to the DSS Test Proctoring Office Room 26-102, 24 hours prior to the exam date or email to [dssproctor@swccd.edu](mailto:dssproctor@swccd.edu).

If the class is held at a Higher Education Center, deliver the exam to the Student Services Front Desk at that campus 24 hours prior to the exam date.

Instructor Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**DSS Use Only:** Total Exam Time: Hours Minutes Proctor Assigned

Day Proctoring Appt Date: Time: : AM PM

Test Accommodations:

Scribe	Extended Time	Reader	Distraction Reduced Environment
Group Setting	Spell Check/Dictionary	Computer	
Read to Self	Enlarged Print	Other:	

DSS Initials Date: