

Examination Application

When you have completed all lessons, fill out this examination application and mail it to the Independent Study office. You may also send in your request via e-mail by submitting the information below to **istudy@uky.edu**. To avoid delays in processing, please complete this form in its entirety.

In order to avoid delays in testing, please send this request in an envelope separate from your lessons at least 14 days prior to your exam date. You will be notified when the exam has been mailed out. You must take your exam within 30 days or the proctor will send the exam back to the Independent Study office.

If you are planning to take your exam in the Independent Study Program office, do not submit this form. Exams are given between the hours of 8:00 a.m. and 2:00 p.m., Monday through Friday. No appointment is necessary. A picture ID is required.

Please Print

Name _____

Address _____

City _____ State _____ Zip _____

Social Security Number _____ E-Mail Address _____

Course _____ Enrollment number _____

Preferred Exam Date _____

I. For In-State College Students Only: (See List Provided)

Testing Center _____

II. For Out-Of-State College Students and Military Personnel

In compliance with regulations governing the supervision of examinations to out-of-state and military personnel independent study students, I have arranged to write my final examination in this course under the supervision of the Testing and Counseling Center, Registrar's Office, Admissions Office or an Academic Dean's Office at a local college or university or the Educational Officer.

Proctor's Name and Title _____

Institution _____

Address _____

City _____ State _____ Zip _____

Telephone (_____) _____