



Assessment Centre
External Invigilator Request
Form

Email all requests to: assessment@ucn.ca

- Exams/Tests can be scheduled on weekdays from 8:30 a.m. to 4:30 p.m.

Proposed Exam Date/Time:	Confirmed Exam Date/Time:
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A: Examinee INFORMATION

Examinee Name:	Examinee Phone Number:	Location: The Pas _____ Thompson _____
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B: EXTERNAL CONTACT INFORMATION

Name of Contact & Title:	Contact E-Mail: _____ Phone number: _____
Name of Institution/Organization:	Course name:

Note: There is a fee of \$60 plus taxes for the invigilation. (Rate increase as of August 28, 2023)

Please provide billing information if invigilation fees are not being paid by the examinee.

C: INVIGILATING INSTRUCTIONS

Materials Allowed/Required:

Exam Format: Paper _____ Online _____

Detailed instructions:

X _____
Examinee Signature

X _____
Contact Signature

Date: _____

Date: _____