

CWU Testing Services

Scantron Exam Scanning Coversheet

DATE
STAMP

Phone: 963-1847 **Mailstop:** 7427 **Email:** testing_services@cwu.edu

- Signature required to return test via campus mail.
- Scantrons must be filled out with #2 (or HB) pencil.
 - Scantrons filled out in pen will be returned unscored.
- Scantrons need to be sorted by class and/or test version.

Instructor Name: _____

Email: _____

Phone: _____

Mail Stop: _____

<i>Test Information</i>									
Class (ie BIOL 101):	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Section #:</td> <td>Form/Version (A; B; etc)</td> </tr> <tr> <td>Section #:</td> <td>Form/Version (A; B; etc)</td> </tr> <tr> <td>Section #:</td> <td>Form/Version (A; B; etc)</td> </tr> <tr> <td>Section #:</td> <td>Form/Version (A; B; etc)</td> </tr> </table>	Section #:	Form/Version (A; B; etc)	Section #:	Form/Version (A; B; etc)	Section #:	Form/Version (A; B; etc)	Section #:	Form/Version (A; B; etc)
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Test Name (ie Midterm 3; Quiz 47.5; Final 6):									
Total # of Scantrons:	Last Question # on Key:								
Questions to be Deleted (please list question #'s):									
Question Point Value (default value is 1 point; please indicate value if changing):									
Other Notes:									

Returning Your Test:

All standard reports (Spreadsheet of Results, Exam Scores, Histogram, Test Scores, Detailed Item Analysis, and Student Response Reports) will be emailed to the provided email address as PDF's.

Campus Mail

○ Signature (required): _____ Date: _____

Pick up

○ Signature (required on pick up): _____ Date: _____

↓ Testing Services Use Only ↓			
Form Type:	½ Green	Full Green	Full Blue
Date Returned:		Time:	
Key File Name:		Exam Data / Excel File Name:	

Processed by: _____ NOTES: _____

Tests are generally processed within 24 hours of receipt (except Fridays)