**Note**: Students must inform both Toronto eSchool Principal and their Teachers when they intend to write their final exam.

## PROCTOR APPROVAL APPLICATION

Scan the completed application and attach it as a pdf or jpg and e-mail to:

admin@torontoeschool.com

Please note: the email must be sent from an external e-mail address, not your Toronto eSchool account.



A. STUDENT INFORMATION – PLEASE PRINT CLEARLY							
Last Name				First Name			
Course Name							
Course Code (ie. MHF4U)				Teacher			
Exam Date				Exam Location	ı		
Exam Time	Parent/Guardian Email Address (If student is under the age of 18)						
	Expected exam da	te, time and lo	ocation are required, but	may be changed a	nfter your request has be	en approved	
Do you have an existing Plan (IEP) with TES?	ou have an existing Individual Education (IEP) with TES?			Please affix a copy of your Proctor's business card here, or forward			
Has this proctor been previously approved for an exam with TES?		YES 🗆	NO 🗆	a copy as an attachment if available.		· · · · · · · · · · · · · · · · · · ·	
Is the proctor on TES's Proctors?	list of Pre-Approved	YES 🗆	NO 🗆	You MUST provide at least <b>one</b> of the following:			
Proctor Checklist – proctor must meet all requirements:  - A copy of the Proctor's business card (in the space							
□ has non-generic email address provided by place of employment;							
$\square$ is not a relative of the student;				(attached to an email).  - A business website where the Proctor's employment can be confirmed <b>on a staff directory</b> (space for this is provided in the Proctor Information section below).			
$\square$ is not a tutor or a student;							
$\square$ has a university degree or college designation;							
☐ has provided a valid business card or can verify employment by other means such as letter of employment or website listing (attached to this application)							
I, the student, agree to: (1) follow the TES Proctored Exam Procedures as outlined in my Course Content, (2) arrange a Proctor who meets all set requirements and set up a date, time and place for my exam, (3) pay for any proctoring service fee, and (4) submit this completed Proctor Approval Application to admin@torontoeschool.com at least 2 weeks before my proposed exam date.  To the best of my knowledge, the information in both the Student and Proctor Sections, are correct:  Student Signature  Date							
B. PROCTOR INFORMATION – PLEASE PRINT CLEARLY AND REVIEW PROCTOR REQUIREMENTS BEFORE SUBMITTING							
To be completed by the student concerning the chosen Proctor.							
Please indicate Mr./Mrs./Mss or other title:							
Last Name				First Name			
Business Name				Title or Occupation			
Business Address				City, Country			
Post-Secondary Degree (ie. BSc)	Business Website (to confirm employment)			)			
OCT# (if teacher)	Preferred Phone Number			r			
Proctor Email Address							
EMAIL ADDRESS REQUIRED: The email address MUST be issued by the Proctor's workplace. Generic or Internet provider addresses will NOT be approved.  * Acceptable Example: lisa@companyname.com    * Unacceptable Example: lisa@gmail.com							
C. OFFICE USE ONLY							
Prerequisite Met:  Proctor Appr		proved:	oved:   Password:		Length:	Pre-Approved Proctor:	
PAA Red	ceived	PM	Sent to Proctor Exam		Notification	PM Received	