

# DSPS

## Proctoring Orientation Certificate of Completion



### Disability Support Programs and Services

- I have reviewed and understand the information presented in the orientation to San Diego Mesa College's Proctoring Services.
- I am submitting this verification of viewing the Proctoring Quiz to the DSPS office by ( ) US mail, ( ) Fax, or ( ) in person.

**Print Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Student ID # :** \_\_\_\_\_

**Date:** Mo. \_\_\_\_\_ Day \_\_\_\_\_ Yr \_\_\_\_\_

**Counselor:** \_\_\_\_\_

**(Office Use Only)**

**Received in DSPS Office by:** \_\_\_\_\_/date \_\_\_\_\_