

Request for Remote Proctoring Accommodation

Please Note: This form is exclusively for candidates requesting accommodation on an Admission exam. Accommodation requests for other exam types should be directed to your school for approval.

To ensure equal opportunity for all qualified individuals as required under the Americans with Disabilities Act (ADA), Elsevier will provide reasonable accommodations for applicants with disabilities. Requestor reserves the right to refuse to engage with such 3rd party vendors; however in doing so acknowledges that this may delay or prevent their ability to take the exam in question in a timely manner. Elsevier will not be responsible for seeking out and securing alternative accommodations if Requestor refuses or rejects working with those 3rd party vendors that Elsevier has secured.

Step 1: Complete the Request for Remote Proctoring Accommodation(s) Form (below)

Step 2: Obtain disability documentation meeting the following criteria:

- Must be typed or printed on official letterhead and signed by an evaluator qualified to make the diagnosis
- Include name, title, and phone number of medical authority or specialist
- Clearly state the diagnosed disability or disabilities
- Description of the disability which details the extent of the disability, the criteria for the diagnosis, the diagnosis, the type and length of treatment
- Describe the specific accommodation(s) requested, as it pertains to testing
- Completed within the last 5 years

Step 3: Submit this form & supporting documentation to:

https://www.hightail.com/u/HESI-Secure

Important: Use of the website suggested herein is not a guarantee of the documents independently, security of the requestors machine, or the network(s) which the requestors machine may reside when performing the transmission. Elsevier only guarantees the security and confidentiality of the documents after they have been successfully and securely transmitted to Hightail.

Step 4: Do not schedule your testing appointment with a remote proctoring vendor (i.e.Examity, ProctorU) until you have received a response from the Elsevier Special Accommodations Team. Typically, a response to an accommodation request is given within **six (6) weeks**.

Request for Remote Proctoring Accommodation Form

The following form must be completed and submitted to Elsevier with all additional supporting documentation for your request for test accommodation(s) to be reviewed. All information to be used for the sole purpose of processing testing accommodation requests for HESI Exams administered through Remote Proctoring.

		Personal Information		
First Name:		Last Name:		
Address:				
	Street Address			Apartment/Unit #
	City		State	ZIP Code
Phone:		Evolve User Name:		
Email:				
School Name:				
School Address	:			
Program Type:				
Exam Name:		Preferred Test Date Date of most recent professional evaluate		
	Po	quested Accommodation(s)		
	P	revious Accommodations		
Please answer denial.	the following questions a	and provide a description of the ac	ccommodation	received or basis for
1. Have y gradua		n accommodation while you were	in college (un	dergraduate or
Descri	be:			
2. Have y	ou previously received a	n accommodation on any standar	dized exam? S	select from list.
Descri	be:			
but no	ou previously received a t limited to accommodation tion Plan (IEP) or a 504 Pl	n accommodation or specialized sons or specialized services proviouslan?	services in gra ded as a result	des K-12, including of an Individualized

Name of Educational Institution:	
Describe:	
Submission Ir	formation
Submit this form and supporting documentation to: https mportant: Use of the website suggested herein is not a gual requestors machine, or the network(s) which the requestors ransmission. Elsevier only guarantees the security and configuecessfully and securely transmitted to Hightail.	c//www.hightail.com/u/HESI-Secure rantee of the documents independently, security of the nachine may reside when performing the
Supporting Documentation: You are required to submit supearning institution that rendered a diagnosis of a current substitutioning. For a temporary disability, the documentation shas the anticipated length of the recovery. The verification documentation must be submitted on the official qualified specialist who has examined the applicant and diagnollowing details: ⇒ Recommended accommodation/modification, as it p ⇒ Description of the disability that details the extent of diagnosis, the type and length of treatment and the results in the submitted in the results in the submitted in the submit	stantial limitation to physical or mental (academic) nould clearly indicate the impact of the disability as well cial letterhead stationary of the authority or licensed or nosed a physical or mental impairment and include the ertains to testing the disability, the criteria for the diagnosis, the ecommended accommodation alified medical authority or specialist
 ⇒ Original signature of the medical authority or special ⇒ Diagnosis within the last 5 years Do not schedule your testing appointment with a remote preceived a response from the Elsevier Special Accommodation request and implement the appropriate accommodations. Typiquen within six (6) weeks. The accommodation itself may taken the resources. 	proctoring vendor (i.e. Examity, ProctorU) until you have ons Team. We will require sufficient time to evaluate the pically, a response to an accommodation request is
Applicant Aut	horization
attest to the fact that the information recorded on this application agree to provide Elsevier with any additional information or do accommodations. I also give permission to release to Else establish the need for the accommodation(s) requested herei application is not sufficient, I authorize Elsevier to obtain additional additi	ation is true, and if this application is not sufficient, I ocumentation requested in order to evaluate my request evier a copy of any pertinent information required to n. If the information provided in support of this tional information from the professionals who treated or
of six (6) weeks prior to my anticipated scheduling date to profession accommodations. I acknowledge that Elsevier reserves the accommodation is warranted and appropriate. I also understate the erritories and may receive limited or no accommodations if I	vide enough time to evaluate and process my request e right to make a final determination as to whether any and I am limited to testing in the United States and its
Applicant Signature:	Date:
Third Party	Release
understand that Elsevier has contracted with an external paraugment its in-house expertise. By submitting my request for share my application and supporting documentation with the consultants for review and consideration as deemed necessal	accommodations, I provide my consent to Elsevier to Elsevier Accommodation Review Team and/or
Applicant Signature:	Date: