

# Exam invigilation request

Name

First

Last

Pronouns

Ex: She/her, he/him, they/them, she/they, he/they

Email

Phone number

Preferred contact method

- Phone
- Email

Library card number

City Library cards begin with 23287

Eligibility

- I am a City of North Vancouver student/resident
- I am a City of North Vancouver business owner
- Other

If you are unsure of where the City boundaries are, please [refer to this map](#).

City Library's exam invigilation service is only available for residents who reside or have a business in the City of North Vancouver. Please see our list of [other organizations offering invigilation](#).

## Select your preferred invigilation times

Preferred date — option 1

Bookings must be made at least two weeks before the requested exam time. There are two regularly scheduled weekly timeslots for exam invigilation: Thursdays 1:30 p.m. – 4:30 p.m.; and Saturdays 1 – 4 p.m.

Preferred start time — Thursdays

- 1:30 p.m.
- 2 p.m.
- 2:30 p.m.
- 3 p.m.

Please select your start time for a Thursday session. Exams on Thursdays must be complete by 4:30 p.m.

Preferred start time — Saturdays

- 1 p.m.
- 1:30 p.m.
- 2 p.m.
- 2:30 p.m.

Please select your start time for a Saturday session. Exams on Saturdays must be complete by 4 p.m.

#### Preferred date — option 2

Bookings must be made at least two weeks in advance of requested exam time. There are two regularly scheduled weekly timeslots for exam invigilation: Thursdays 1:30 p.m. – 4:30 p.m.; and Saturdays 1 – 4 p.m.

#### Preferred start time — Thursdays

- 1:30 p.m.
- 2 p.m.
- 2:30 p.m.
- 3 p.m.

Please select your start time for a Thursday session. Exams on Thursdays must be complete by 4:30 p.m.

#### Preferred start time — Saturdays

- 1 p.m.
- 1:30 p.m.
- 2 p.m.
- 2:30 p.m.

Please select your start time for a Saturday session. Exams on Saturdays must be complete by 4 p.m.

#### Time required for your exam:

E.g., two hours

My exam is for:

- High school
- Home school
- College/university
- Work/professional accreditation
- Personal interest
- Other...

Enter other...

When I complete my studies, I will have a:

- Diploma
- Degree
- Certification
- Other...

Enter other...

Type of exam

- Paper
- Online/digital

#### The topic I am studying is:

# Issuing institution information

## Institution contact

Name

Institution

Ex: Capilano University

Email

Phone

Address

Address 2

City/Town

State/Province

- Select -



ZIP/Postal Code

Please enter the contact details of the person at your institution who is issuing the exam.

Please fill out the details of the institution that is issuing your exam.

Is there anything else we should know about your exam?

## Service use agreement

### Service use agreement

- ? I understand that this service is free to qualifying individuals; however, I agree to be responsible for any costs related to exam supplies, or to the receiving and returning of exams, such as postage or courier charges.
- ? I agree to arrange for the exam (or passwords for online examinations) to be sent to the North Vancouver City Library at least three days in advance of my scheduled exam time.
- ? I agree to bring my library card and proof of City of North Vancouver residence, proof of City of North Vancouver business address, or proof of student status at a City of North Vancouver school, to the exam invigilation.

## Freedom of Information and Protection of Privacy Act Notice

The library is collecting your personal information in accordance with Section 26(c) of the Freedom of Information and Protection of Privacy Act. If you have any questions, please contact us at 120 14th St. West, North Vancouver, BC, V7M 1N9, or [604-998-3495](tel:604-998-3495) or [privacy@nvcl.ca](mailto:privacy@nvcl.ca).