**Dawson College - Opscan Submission Form**

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| **Last Name:**      **First Name:**       **Phone ext:**      **Dept.:**       **Date:**      **Course Title:**      **Version:**      **Pickup** [ ]  **Send** [ ]  exam (please check one) |

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| **Total number of questions on the exam:**     (include omitted questions if any)**Exam value (as a percentage %):**  %**Decimal value is now accepted****Number(s) of the question(s) you are omitting:**       |

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| **Checklist before submitting****Transmittal form**[ ]  All spaces are filled in correctly. **Master**[ ]  0000001 as student number is shaded in.[ ]  Teacher Last Name & First name is shaded.**Omitted question(s) (if applicable)**[ ]  0000002 as student number, is shaded in [ ]  To omit a question, shade **“A”** on the  appropriate numbered question. | **Additional comments (if any)** |

For any questions or inquiries please call extension HELP (**4357**)

This “Opscan Submission Form” can be obtained online at:

<https://www.dawsoncollege.qc.ca/information-systems-and-technology/docs-policies/forms/>