

Exam Request

1. Facts

1.1	Name of institution	<input type="text"/>
1.2	Who in the institution is responsible for communication?	<input type="text"/>
1.3	Course name	<input type="text"/>
1.4	Name of the examiner	<input type="text"/>
1.5	Examination period	<input type="text"/>
1.6	Examination location/room	<input type="text"/>
1.7	Number of participants (estimated)	<input type="text"/>
1.8	Who supervises the technical aspects of the test?	<input type="text"/>
1.9	What equipment?	<input type="text"/> Notebooks (max. 100) <input type="text"/> iPads (max. 200) <input type="text"/> PC pool of the institution <input type="text"/> iPads of the institution
1.10	When is the follow-up date?	<input type="checkbox"/> no <input type="checkbox"/> yes, the date is <input type="text"/>

2. Technique

2.1	What network?		<input type="text"/> If institution network is used: <input type="checkbox"/> clarified with officials
2.2	Software required on the clients?		<input type="checkbox"/> no <input type="checkbox"/> yes, we require: <input type="text"/>
2.3	Software required on the MINTFIT server?		<input type="checkbox"/> no <input type="checkbox"/> yes, we require: <input type="text"/>
2.4	Software required on a university Server?		<input type="checkbox"/> no <input type="checkbox"/> yes, we require: <input type="text"/>
2.5	Operating system		<input type="text"/>
2.6	User accounts	Device	<input type="text"/>
2.7		Examination	<input type="text"/>
2.8	Planned task types		<input type="checkbox"/> Multiple Choice <input type="checkbox"/> Media (graphics, videos) <input type="checkbox"/> STACK <input type="checkbox"/> Free text <input type="checkbox"/> Programming <input type="text"/>
2.9	Time and place for configuration and test of booked devices		<input type="text"/>

3. Preparation

3.1	Already performed an electronic examination? 	<input type="checkbox"/> no <input type="checkbox"/> yes, the last time was on: <input type="text"/>
3.2	When will the examination content be ready?	<input type="text"/>
3.3	What is the format of the examination content?	<input type="checkbox"/> Webapplication <input type="checkbox"/> Local program
3.4	If devices are on site for several days: In which room is there safe custody?	<input type="text"/>
3.5	If examinations take place several days in a row: Staff and power outlets are available for overnight charging?	<input type="checkbox"/> no <input type="checkbox"/> yes, the person's name is: <input type="text"/>
3.6	Contact person for the delivery of the equipment Date, time, name, phone	<input type="text"/>
3.7	Contact person for the pick-up of the devices Date, time, name, phone	<input type="text"/>

4. Room sketch/photos

