AFFIDAVIT OF PERSONAL RESPONSIBILITY To be Signed by Student

I declare that I personally completed this exam without any outside assistance including course material, other source material or assistance from any person(s).

_____ _____

Signature (sign in ink only) Date

AFFIDAVIT OF EXAM COMPLETION
To be Completed and Signed by Exam Monitor

I declare that I personally observed the above named individual during the completion of this examination and also observed that the student received no outside assistance in completing the examination.

_____ _____

Name of Student Name of Course

_____

Address where exam was taken

_____ _____ _____

Date exam was taken Beginning time Ending time

MONITOR: DISINTERESTED THIRD PARTY

_____ _____

Print name of person administering test Job title of person administering test

_____ _____

Company/agency name Business phone number

_____

Business mailing address

_____ _____

Signature of person administering test (sign in ink only) Date

Student ID number _____

NOTE: All affidavits must be faxed to The American College CE Department (fax: 610-526-1402) no later than the day following the exam. State insurance continuing education will not be granted if your monitor/proctor affidavit is not received in a timely manner. Students who fail to return the appropriate affidavit will have to take the exam again if CE is desired.