Duplicate/Rush CE Certification Request

THE AMERICAN COLLEGE

Complete and Return this Form

- **Fax your request to:**
  The American College
  Attention: CE Dept.
  610-526-1402
- **Check:**
  The American College
  Attention: CE Dept.
  270 S. Bryn Mawr Ave.
  Bryn Mawr, PA 19010

When you successfully complete your course with The American College, and have requested continuing education, you will need to send in your Monitored/Proctor Affidavits (for those states that require them). Following that and upon paying roster-reporting fees, you are automatically issued a certificate of completion for the approved number of continuing education credits for your resident state. There is no additional charge for your first certificate of completion.

Many states maintain reciprocal agreements with other states. This means that meeting the continuing education requirement in a participating resident state will satisfy the requirements for continuing education in participating nonresident states in which you are licensed.

As a licensed agent, you are responsible for knowing and meeting the continuing education requirements of all states in which you are licensed.

If you would like a duplicate certificate because you have misplaced the original, if you require your continuing education credits to be reported immediately outside of our normal processing time of 5-7 business days, or if continuing education credit was never requested at the time of registration and you now require immediate processing and reporting, please complete the form below. The fee for each additional/replacement certificate or rush request is $20. (Note: This does not cover applicable roster reporting fees. Additional overnight fees will apply.) For any questions, please contact the Continuing Education Department at 800-821-8356 or visit us at TheAmericanCollege.edu.

Student Name: _____ Student ID# _____

Resident State: _____ License Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ E-Mail Address: _____

Course Title: _____

☐ Enclosed please find my check for $_____

☐ Please charge my duplicate certificate request to my

☐ VISA ☐ MC ☐ AMEX ☐ DISCOVER

Account Number: | | | | | | | | | | | | | | | | | | Exp. Date | | | |

Total amount enclosed and/or charged: $_____

Name: (print)_____

Signature: _____

This signature serves as my agreement to The College's refund policies and authorization to charge my credit card.