

**IOWA AFFIDAVIT OF PERSONAL RESPONSIBILITY
To be Signed by the 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).

Date _____

Signature (sign in ink only) _____

**AFFIDAVIT OF EXAM COMPLETION
To be Completed and Signed by Exam Proctor**

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

Name of Course Name of Student

Address where exam was taken

Date Exam was taken Beginning time Ending time

Type of proctor (check one) Provider Representative Licensed Producer

Provider or Producer License Number _____

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 Date
(sign in ink only)

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.