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

_________________________________________ Date

Signature of person administering test (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.