Please note: This form should be faxed, mailed or electronically submitted to the sponsor/vendor. The sponsor/vendor must keep a copy of this affidavit with a copy of the exam for three (3) years after the exam was completed. 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.

Section I – To be completed by Proctor

I certify under the penalty of perjury that I have verified the identification (including a photo ID and producer license number) of the said producer named below. The producer completed the examination independently and without the assistance of any course materials, other source materials, advance review of the examination or from any persons. I certify that the exam answer sheet and all scratch paper given to the examinee were returned and no copy of the examination(s) was/were made by the examinee. I also certify that I mailed/delivered the answer sheet and all other required materials to the vendor within two business days of the exam date. I hereby certify that I have not made or retained copies of any examination or work papers for further distribution.

Further, I certify that I am a Disinterested Third Party and not someone who is: (A) a minor; (B) a relative of the producer; (C) an immediate supervisor/manager of the producer, or (D) a person with an economic or other interest in assuring the successful outcome of the examination.

NOTE: Employment by the same company or working for the same employer does not mean a person has ‘an economic or other direct interest in assuring the successful outcome of the examination.’ For example: a co-employee or co-worker of the producer taking the competency examinations may administer the examination so long as the other requirements of this subparagraph are met and such co-employee or co-worker does not work on a regular basis with the producer in marketing or sales capacity the examinee is not related.

Proctor’s Printed Name: ____________________________
Proctor’s Business Mailing Address: __________________________________________________________________
Day Time Phone Number: ____________________________
Signature of Proctor: __________________________________________

Section II – To be completed by Examinee

I certify under the penalty of perjury that I took the examination(s) independently and without the assistance of any course materials, other source materials, advance review of the examination(s), or from any persons. I did immediately (Within 24 Hours), upon completion of the examination(s) return the exam, and answer sheet and all scratch paper to (NAME OF CE COURSE SPONSOR).

No copy of the examination(s) was/were made.

Proctor’s Printed Name: ____________________________
Date Exam Taken: ____________________________ Course Title ____________________________
Examinee’s Printed Name/Student ID Number: __________________________________________
Examinee’s Signature: __________________________________________
Examinee’s License Number: __________________________________________

Section III – To be completed by Examinee

If you participated in a classroom review session, please answer the following questions:

_____ I did  _____ I did not participate in a classroom review session. If so, provide course number __________.

Name of the individual who conducted my review session: __________________________________________

Date/time/location of review session: __________________________________________
Length of review session: __________________________________________

Did you receive your course material at least seven (7) days in advance of the review session? _____ If no, when did you receive the course material? ____________________________