

AFFIDAVIT OF EXAM AND CE REQUEST FORM

To receive any credit, an exam score of 70 or above must be attained. If you **did not pass** the exam, the affidavit of exam and the CE Request form is **not** required.

To receive CE credit for **CISR or CSRM** online courses, the CE Request form and the Affidavit of exam are required. If you do not need state CE credit, you must check the NO CE credit box at the bottom of the form. *Fax both documents to 512/349-6194 Attn: CE Department* and mail the originals within 5 days to:

The National Alliance for Insurance Education & Research
Attn: CE Department
PO Box 27027
Austin, TX 78755-2027

Thank you for choosing this National Alliance for Insurance Education & Research online course to meet your educational needs.

PENNSYLVANIA

A passing score of 70 or more is required to receive state continuing education credit (CE), CISR update credit or CISR designation credit. An affidavit, signed by you and your proctor, is required for every exam. If you would like to request state CE credit, please fill out the CE Request form attached to this affidavit. **Please note that a student currently working on achieving the CISR designation may not serve as proctor for your exam.** Mail all forms within 5 days to:

The National Alliance for Insurance Education & Research
Attn: OnLine Programs
P. O. Box 27027 Austin TX 78755-2027

Affidavit of Exam Completion
Completed and Signed by Exam Monitor

Address of Exam Location		
Street		
City	State	Postal Code
Exam Date	Begin Time AM PM	End Time AM PM
Monitor Type: <input type="checkbox"/> Training Director <input type="checkbox"/> Librarian <input type="checkbox"/> Personal Director <input type="checkbox"/> Other		
Name of Person Administering Exam		Title of Administerer of Exam
Agency/Company Name		Business Telephone Ext.
Business Mailing Address		
City	State	Postal Code
I certify that I, a disinterested third party, verified the identification of the student as signed below and that I administered said student's final examination. I further certify that the exam was completed without external or personal assistance of any type.		

Student's Name (Please print.)	Student's Phone	Course Name

Signature of Person Administering the Exam	Date	

Affidavit of Personal Responsibility Completed and Signed by Student

I affirm that I personally completed the entire study material of the course. I also affirm that I completed the exam without assistance from any course material, other source material, or from any persons.	

Student's Signature	Date

Administering School Risks (WBT)

DATE of EXAM: _____

Name (as it appears on your license): _____

Date of Birth: / /

Company Name: _____

Office Phone: ()

Mailing Address: check one: Office
 Home

Email: _____

City / State / Zip: _____

SSN - Last 4 digits for NM & NY:

FILING FEES Credit Card Information: AmEx MC Visa Discover

Name on Card _____
Card Number: _____ Exp. Date ____/____

A. **State Fees:** All reporting fees listed below are forwarded directly to the state Departments of Insurance. All residents requesting a certificate for one of these states must submit the required fee. **Your home state has a continuing education law and a reciprocal agreement with your non-resident state. You will not be issued additional certificates. Please contact the Licensing Dept. in your non-resident state(s) to determine the documentation required to renew your non-resident license.**

Check here if a check will be mailed for state fees

B. **Late Fee:** Turn in this completed form with your affidavit **within 5 days** to avoid the \$20.00 late fee.

C. **Rush Fees:** A \$25 fee is required for rush processing. An additional \$15 fee is required for overnight service.

Make checks for all fees (state, late, rush, and/or overnight) payable to: **The National Alliance**. Submit payment with this form. Please mail **late** request forms and appropriate fee(s) to: **THE NATIONAL ALLIANCE • ATTN: CONTINUING EDUCATION DEPT • PO BOX 27027 • AUSTIN TX 78755-2027**

Resident State	
Alabama	<input type="checkbox"/> NPN State Fee \$8
Alaska	<input type="checkbox"/>
Arizona	<input type="checkbox"/> License #
Arkansas	<input type="checkbox"/> License #
California	<input type="checkbox"/> License #
Colorado	<input type="checkbox"/> License #
Connecticut	<input type="checkbox"/> License # State Fee \$3.75
Delaware	<input type="checkbox"/> NPN State Fee \$8
DC	<input type="checkbox"/> NPN State Fee \$8
Florida	<input type="checkbox"/> Agent License # <input type="checkbox"/> ADJ License #
Georgia	<input type="checkbox"/> License #
Hawaii	<input type="checkbox"/> Entity #
Idaho	<input type="checkbox"/> License # State Fee \$8
Illinois	<input type="checkbox"/> NPN
Indiana	<input type="checkbox"/> License # State Fee \$4
Iowa	<input type="checkbox"/> License # State Fee \$8
Kansas	<input type="checkbox"/> NPN State Fee \$8
Kentucky	<input type="checkbox"/> License #
Louisiana	<input type="checkbox"/> License #
Maine	<input type="checkbox"/> License #
Maryland	<input type="checkbox"/> License # State Fee \$4.80
Massachusetts	<input type="checkbox"/> License # State Fee \$4
Michigan	<input type="checkbox"/> System ID# State Fee \$8
Minnesota	<input type="checkbox"/> License #
Mississippi	<input type="checkbox"/> License # <input type="checkbox"/> ADJ License # State Fee \$4
Missouri	<input type="checkbox"/> NPN State Fee \$8

Resident State	
Montana	<input type="checkbox"/> License #
Nebraska	<input type="checkbox"/> License #
Nevada	<input type="checkbox"/> License # State Fee \$8
New Hampshire	<input type="checkbox"/> NPN <input type="checkbox"/> Agent State Fee \$8 <input type="checkbox"/> ADJ Multi Lines \$8
New Jersey	<input type="checkbox"/> License #
New Mexico	<input type="checkbox"/>
New York	<input type="checkbox"/> License #
North Carolina	<input type="checkbox"/> NPN State Fee \$13.20
North Dakota	<input type="checkbox"/> NPN State Fee \$8
Ohio	<input type="checkbox"/> NPN State Fee \$8
Oklahoma	<input type="checkbox"/> Agent Lic # <input type="checkbox"/> ADJ Lic #
Oregon	<input type="checkbox"/>
Pennsylvania	<input type="checkbox"/> License # State Fee \$4.50
Rhode Island	<input type="checkbox"/> NPN State Fee \$8
South Carolina	<input type="checkbox"/> License #
South Dakota	<input type="checkbox"/> License # State Fee \$8
Tennessee	<input type="checkbox"/> NPN State Fee \$8
Texas	<input type="checkbox"/> License # State Fee \$6
Utah	<input type="checkbox"/> License #
Vermont	<input type="checkbox"/> License # State Fee \$12
Virginia	<input type="checkbox"/> License #
Washington	<input type="checkbox"/> OIC #
West Virginia	<input type="checkbox"/> License # State Fee \$12
Wisconsin	<input type="checkbox"/> License #
Wyoming	<input type="checkbox"/>

I understand that in order to receive State CE credit, I must pass a proctored exam and submit this form (and any applicable fees) with my affidavit.
 Check here if you do not need this course filed for CE

Your Signature

Date WADM Online Revised 7.20.2010

Fundamentals of Risk Management (WBT)

DATE of EXAM: _____

Name (as it appears on your license): _____

Date of Birth: / /

Company Name: _____

Office Phone: ()

Mailing Address: check one: Office
 Home

Email: _____

City / State / Zip: _____

SSN - Last 4 digits for NM & NY: _____

FILING FEES Credit Card Information: AmEx MC Visa Discover

Name on Card _____
Card Number: _____ Exp. Date ____/____

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Resident State	
Alabama	<input type="checkbox"/> NPN State Fee \$6
Alaska	<input type="checkbox"/>
Arizona	<input type="checkbox"/> License #
Arkansas	<input type="checkbox"/> License #
California	<input type="checkbox"/> License #
Colorado	<input type="checkbox"/> License #
Connecticut	<input type="checkbox"/> License # State Fee \$3.75
Delaware	<input type="checkbox"/> NPN State Fee \$6
DC	<input type="checkbox"/> NPN State Fee \$6
Florida	<input type="checkbox"/> Agent License # <input type="checkbox"/> ADJ License #
Georgia	<input type="checkbox"/> License #
Hawaii	<input type="checkbox"/> Entity #
Idaho	<input type="checkbox"/> License # State Fee \$6
Illinois	<input type="checkbox"/> NPN
Indiana	<input type="checkbox"/> License # State Fee \$4
Iowa	<input type="checkbox"/> License # State Fee \$6
Kansas	<input type="checkbox"/> NPN State Fee \$6
Kentucky	<input type="checkbox"/> License #
Louisiana	<input type="checkbox"/> License #
Maine	<input type="checkbox"/> License #
Maryland	<input type="checkbox"/> License # State Fee \$3.60
Massachusetts	<input type="checkbox"/> License # State Fee \$2.50
Michigan	<input type="checkbox"/> System ID # <input type="checkbox"/> State Fee \$6
Minnesota	<input type="checkbox"/> License #
Mississippi	<input type="checkbox"/> License # State Fee \$4
Missouri	<input type="checkbox"/> NPN State Fee \$6

Resident State	
Montana	<input type="checkbox"/> License #
Nebraska	<input type="checkbox"/> License #
Nevada	<input type="checkbox"/> License # State Fee \$6
New Hampshire	<input type="checkbox"/> NPN <input type="checkbox"/> Agent State Fee \$6 <input type="checkbox"/> Multi-Line Adj State Fee \$6 <input type="checkbox"/> Public Adj State Fee \$6
New Jersey	<input type="checkbox"/> License #
New Mexico	<input type="checkbox"/>
New York	<input type="checkbox"/> License #
North Carolina	<input type="checkbox"/> NPN# State Fee \$9.90
North Dakota	<input type="checkbox"/> NPN State Fee \$6
Ohio	<input type="checkbox"/> NPN State Fee \$6
Oklahoma	<input type="checkbox"/> Agent Lic # <input type="checkbox"/> ADJ Lic #
Oregon	<input type="checkbox"/>
Pennsylvania	<input type="checkbox"/> License # State Fee \$4.50
Rhode Island	<input type="checkbox"/> NPN State Fee \$6
South Carolina	<input type="checkbox"/> License #
South Dakota	<input type="checkbox"/> License # State Fee \$5
Tennessee	<input type="checkbox"/> NPN State Fee \$6
Texas	<input type="checkbox"/> License # State Fee \$4.50
Utah	<input type="checkbox"/> License #
Vermont	<input type="checkbox"/> License # State Fee \$9
Virginia	<input type="checkbox"/> License #
Washington	<input type="checkbox"/> OIC #
West Virginia	<input type="checkbox"/> License # State Fee \$9
Wisconsin	<input type="checkbox"/> License #
Wyoming	<input type="checkbox"/>

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Check here if you do not need this course filed for CE

Your Signature

Date WFUN Online Revised 7.20.2010

Handling School Risks (WBT)

DATE of EXAM: _____

Name (as it appears on your license): _____ Date of Birth: ____ / ____ / ____

Company Name: _____ Office Phone: (____) ____ - ____

Mailing Address: check one: Office Home _____ Email: _____

City / State / Zip: _____ **SSN - Last 4 digits for NM & NY:** _____

FILING FEES Credit Card Information: AmEx MC Visa Discover

Name on Card _____ Exp. Date ____/____/____

Card Number: _____

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Resident State	
Alabama	<input type="checkbox"/> NPN State Fee \$5
Alaska	<input type="checkbox"/>
Arizona	<input type="checkbox"/> License #
Arkansas	<input type="checkbox"/> License #
California	<input type="checkbox"/> License #
Colorado	<input type="checkbox"/> License #
Connecticut	<input type="checkbox"/> License # State Fee \$3.75
Delaware	<input type="checkbox"/> NPN State Fee \$5
DC	<input type="checkbox"/> NPN State Fee \$5
Florida	<input type="checkbox"/> Agent License # <input type="checkbox"/> ADJ License #
Georgia	<input type="checkbox"/> License #
Hawaii	<input type="checkbox"/> Entity #
Idaho	<input type="checkbox"/> License # State Fee \$5
Illinois	<input type="checkbox"/> NPN
Indiana	<input type="checkbox"/> License # State Fee \$4
Iowa	<input type="checkbox"/> License # State Fee \$5
Kansas	<input type="checkbox"/> NPN State Fee \$4
Kentucky	<input type="checkbox"/> License #
Louisiana	<input type="checkbox"/> License #
Maine	<input type="checkbox"/> License #
Maryland	<input type="checkbox"/> License # State Fee \$3
Massachusetts	<input type="checkbox"/> License # State Fee \$2.00
Michigan	<input type="checkbox"/> System ID # <input type="checkbox"/> State Fee \$5
Minnesota	<input type="checkbox"/> License #
Mississippi	<input type="checkbox"/> License # State Fee \$4
Missouri	<input type="checkbox"/> NPN State Fee \$5

Resident State	
Montana	<input type="checkbox"/> License #
Nebraska	<input type="checkbox"/> License #
Nevada	<input type="checkbox"/> License # State Fee \$5
New Hampshire	<input type="checkbox"/> NPN <input type="checkbox"/> Agent State Fee \$6 <input type="checkbox"/> Multi-Line Adj State Fee \$6
New Jersey	<input type="checkbox"/> License #
New Mexico	<input type="checkbox"/>
New York	<input type="checkbox"/> License #
North Carolina	<input type="checkbox"/> NPN State Fee \$8.25
North Dakota	<input type="checkbox"/> NPN State Fee \$5
Ohio	<input type="checkbox"/> NPN State Fee \$5
Oklahoma	<input type="checkbox"/> Agent Lic # <input type="checkbox"/> ADJ Lic #
Oregon	<input type="checkbox"/>
Pennsylvania	<input type="checkbox"/> License # State Fee \$4.50
Rhode Island	<input type="checkbox"/> NPN State Fee \$5
South Carolina	<input type="checkbox"/> License #
South Dakota	<input type="checkbox"/> License # State Fee \$5
Tennessee	<input type="checkbox"/> NPN State Fee \$5
Texas	<input type="checkbox"/> License # State Fee \$3.75
Utah	<input type="checkbox"/> License #
Vermont	<input type="checkbox"/> License # State Fee \$7.50
Virginia	<input type="checkbox"/> License #
Washington	<input type="checkbox"/> OIC #
West Virginia	<input type="checkbox"/> License # State Fee \$7.50
Wisconsin	<input type="checkbox"/> License #
Wyoming	<input type="checkbox"/>

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Your Signature

Date WHAN Online Revised 7.20.2010

Measuring School Risks (WBT)

DATE of EXAM: _____

Name (as it appears on your license): _____ Date of Birth: ____ / ____ / ____

Company Name: _____ Office Phone: (____) ____ - ____

Mailing Address: check one: Office Home _____ Email: _____

City / State / Zip: _____ **SSN - Last 4 digits for NM & NY:** _____

FILING FEES Credit Card Information: AmEx MC Visa Discover

Name on Card _____ Exp. Date ____ / ____

Card Number: _____

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Resident State	
Alabama	<input type="checkbox"/> NPN State Fee \$8
Alaska	<input type="checkbox"/>
Arizona	<input type="checkbox"/> License #
Arkansas	<input type="checkbox"/> License #
California	<input type="checkbox"/> License #
Colorado	<input type="checkbox"/> License #
Connecticut	<input type="checkbox"/> License # State Fee \$3.75
Delaware	<input type="checkbox"/> NPN State Fee \$8
DC	<input type="checkbox"/> NPN State Fee \$8
Florida	<input type="checkbox"/> Agent License # <input type="checkbox"/> ADJ License #
Georgia	<input type="checkbox"/> License #
Hawaii	<input type="checkbox"/> Entity #
Idaho	<input type="checkbox"/> License # State Fee \$8
Illinois	<input type="checkbox"/> NPN
Indiana	<input type="checkbox"/> License # State Fee \$4
Iowa	<input type="checkbox"/> License # State Fee \$8
Kansas	<input type="checkbox"/> NPN # State Fee \$7
Kentucky	<input type="checkbox"/> License #
Louisiana	<input type="checkbox"/> License #
Maine	<input type="checkbox"/> License #
Maryland	<input type="checkbox"/> License # State Fee \$4.80
Massachusetts	<input type="checkbox"/> License # State Fee \$1.50
Michigan	<input type="checkbox"/> State Fee \$8
Minnesota	<input type="checkbox"/> License #
Mississippi	<input type="checkbox"/> License # State Fee \$4
Missouri	<input type="checkbox"/> NPN State Fee \$8

Resident State	
Montana	<input type="checkbox"/> License #
Nebraska	<input type="checkbox"/> License #
Nevada	<input type="checkbox"/> License # State Fee \$8
New Hampshire	<input type="checkbox"/> NPN <input type="checkbox"/> Agent State Fee \$8
New Jersey	<input type="checkbox"/> License #
New Mexico	<input type="checkbox"/>
New York	<input type="checkbox"/> License #
North Carolina	<input type="checkbox"/> NPN State Fee \$13.20
North Dakota	<input type="checkbox"/> NPN State Fee \$8
Ohio	<input type="checkbox"/> NPN State Fee \$8
Oklahoma	<input type="checkbox"/> Agent Lic # <input type="checkbox"/> ADJ Lic #
Oregon	<input type="checkbox"/>
Pennsylvania	<input type="checkbox"/> License # State Fee \$4.50
Rhode Island	<input type="checkbox"/> NPN State Fee \$8
South Carolina	<input type="checkbox"/> License #
South Dakota	<input type="checkbox"/> License # State Fee \$8
Tennessee	<input type="checkbox"/> NPN State Fee \$8
Texas	<input type="checkbox"/> License # State Fee \$6
Utah	<input type="checkbox"/> License #
Vermont	<input type="checkbox"/> License # State Fee \$12
Virginia	<input type="checkbox"/> License #
Washington	<input type="checkbox"/> OIC #
West Virginia	<input type="checkbox"/> License # State Fee \$12
Wisconsin	<input type="checkbox"/> License #
Wyoming	<input type="checkbox"/>

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Your Signature

Date

WMEA Online Revised 7.20.2010