

MISSISSIPPI MONITOR AFFIDAVIT

It is your responsibility to print, complete, sign and fax this required monitor affidavit to **Quest Continuing Education Solutions** at 414-375-3449. FAILURE TO SUBMIT THE AFFIDAVIT WITHIN TWO BUSINESS DAYS OF EXAM COMPLETION MAY RESULT IN LOSS OF COURSE CREDIT.

Student Exam Certification / Declaration of Compliance

To be completed and signed by student.

Print Name of Student: _____ Phone: _____

State of Licensure: _____ License Number: _____ Expiration: _____

I affirm that I personally completed this examination without assistance from any outside source. I understand it is my responsibility to file and/or maintain my certificate of completion as required by the state insurance department.

Student Signature

Date * must match date of exam completion

Affidavit of Exam Monitor

To be completed and signed by exam monitor.

Course Title: _____

Date of Exam Completion: _____ Start Time: _____ End Time: _____

Location of Exam Completion: _____

Print Monitor Name: _____

Monitor Company Name: _____ Monitor Title: _____ Daytime Phone: _____

Monitor Business Address: _____

Type of identification presented (*optional*): _____

Indicate Type of Monitor

Disinterested Third Party

Mississippi Insurance Department - Continuing Education Guidelines

DEFINITIONS

3. "Disinterested Third Party" - a person not concerned with respect to possible gain or loss in the result of a pending course final examination

CALCULATION OF CREDIT HOURS

2. Correspondence and Internet study programs A. Self-Study and on-line final exams are required to be monitored by a disinterested third party (i.e. someone with no insurance business or family relationship to the student).

Continuing Education Provider Procedures Packet

A Disinterested 3rd Party Proctor is defined as a NON-INSURANCE RELATED person, age 18 or older, having no family, friend or employment relationship to the student or being in the income stream of the student. Proctor may not be employed by the same company as examinee. An example of a disinterested third party is a testing center, public library, public school, college or university.

I hereby certify that I personally observed the above named student during the completion of this online examination and also observed that the student received no outside assistance in completing the examination.

Monitor Signature

Date * must match date of exam completion