

# MASSACHUSETTS 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

**A disinterested third party is defined as someone who is not:** a minor; a relative of the producer; a supervisor or sub-ordinate of the producer; or a person with an economic or other interest in assuring the successful outcome of the examination. Note: Being employed 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, co-employees or co-workers of the producer taking the exam may administer the exam so long as the other requirements are met and the co-employee or co-worker does not work on a regular basis with the producer in a marketing or sales capacity.

**Examples of a disinterested third party might be:** a testing center employee, librarian, teacher, training coordinator, or public official.

**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