NEW JERSEY 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.

Print Name of Student:		Phone:
		Expiration:
	oility to file and/or maintair	out assistance from any outside source. n my certificate of completion as required
Student Signature		Date * must match date of exam completion
avit of Exam Monitor		
completed and signed by exam m	onitor.	
Course Title:		
Date of Exam Completion:	Start Time:	End Time:
Location of Evam Completion:		
Print Monitor Name:		
Monitor Company Name:	Monitor Title:	Daytime Phone:
Monitor Business Address:		
Type of identification presented (optional	<i>I</i>):	
the student - a supervisor or s be testing center employee, li	subordinate of the student may not moni brarian, teacher, or public official.	nship to the student. Monitor may not be in the income stream for the examination. Example of a disinterested third party migi
	Code §11:17-3.6 Continuing Educations ates in a monitored examination of the s	Self-study courses shall be considered for approval if the ubject present.
		ed student during the completion of this eceived no outside assistance in