

Test Administrator Affidavit

I hereby certify that the exams administered on _____ (date) were conducted according to the policies, procedures, and standards outlined in the Test Administrator's Guide. Among those conditions are:

- Exam booklets were stored in a safe place and were not shared or available to anyone until the date and time designated for their administration.
- Examinees were under the constant supervision of the proctor during the entire examination, which was administered according to the time standards established by the American Institute for CPCU/Insurance Institute of America or its agent.
- Answers to the test questions were recorded at the time of the examination, by the examinee and without the additional help or assistance of anyone or anything.
- Examinees did not use or possess notes or other prohibited study aids nor did they receive verbal answers or other forms of assistance from anyone.
- Examinees did not recopy or photograph test questions, nor communicate or dictate questions or answers to anyone, or engage in other compromising behavior before, during, or after the examination.
- Exam questions were not changed or interpreted for the examinees
- The exams were not reopened, reviewed, edited, corrected, or copied after time expired for the examination.
- Test questions were placed in an envelope or similar shipping parcel immediately after the conclusion of the exam.

I agree and understand that should the American Institute for CPCU/Insurance Institute of America or its agent find that the above certification is false and not made in good faith, said Institute(s) may declare the examination results null and void and without recourse for the proctor or the examinees who compromised the integrity of the examinations.

The instructor's information is needed only if different from the test administrator.

(Test Administrator's Signature)

(Instructor's Signature)

(Test Administrator – please print name)

(Instructor – please print name)

(Test Administrator's phone number)

(Instructor's phone number)

This completed form must be returned to the Institutes with all used exam materials.

Please complete the other side of this sheet

Exam Administration Report

Examination Information

Course: _____

Test Location:

City: _____ State: _____

Problems Encountered

Please list any irregularities during testing. If this involves a particular student, please include the student's name and ID number

Suggestions for Future Administration of Examinations: