## North Carolina AFFIDAVIT OF PERSONAL RESPONSIBILITY To be Signed by Student

I declare that I personally completed this exam without any outside assistance including course material, other source material or assistance from any one person(s).

Signature (sign in ink only)		Date
AFFIDAVIT OF EXA To be Completed and Sig		
I declare that I personally observed the above this examination and also observed that the structure completing the examination.		
Name of Student	Name of Course	
Address where e  Date exam was taken  Address where e	xam was taken  Beginning time	Ending time
MONITOR: DISINTERESTED THIRD PA	ARTY	
Print name of person administering test	Job title of pers	son administering test
Company/agency name	Business phone number	
Business mail	ling address	
Signature of person administering ter (sign in ink only)	st	Date