## New York Monitor Affidavit

## This section is to be completed by the New York State (NYS) Approved Monitor. (Please Print Clearly)

Monitor Name:	Business Phone:
Business Address:	
NYS Approved Monitor Number: (Attach a copy of the NYS Monitor App	
Course Title:	
Location of Exam:	
Completion Date:	
Time exam began:	Time exam ended:
examinee completed this examination administered as a closed-book examicompleting the exam. I certify that, to	n (Photo ID Required) of the examinee who has signed below and that the without the outside assistance of any person. I certify that the examination was ination and the examinee used no outside materials or course materials in my knowledge, no copies of this examination were made and that the exam he examination. I certify that I meet the requirements of a New York State
Signature of NYS Approved Monitor:	Date:
Please submit answer sheet (if a writt Document and Request for Certificate	NYS approved monitor to submit this Affidavit)  en course), NYS Monitor Affidavit with a copy of your NYS Monitor Approval of completion to BEST. If the examination was taken online, please submit the your NYS Monitor Approval Document to BEST. The NYS Approved Monitor
Broker Educational Sales & Training, Ir or FAX to (727) 372-7585.	nc., 7137 Congress Street, New Port Richey, FL 34653
This section is to be compl	eted by the Examinee. (Please Print Clearly)
Examinee Name:	Business Phone:
Business Address:	
NYS License Number:	Social Security Number (last four digits): _XXX-XX-
was administered as a closed-book exall certify that I did not make or retain cop	on without the outside assistance of any person. I certify that the examination amination and that I did not view the exam prior to the start of the examination. pies of this examination. I certify that, upon completion of this examination, I answer sheet and this New York Monitor Affidavit to the NYS approved
Signature of Examinee:	Date: