

# Virginia Land Title Association Online Courses

## STUDENT CERTIFICATION

(to be signed by the student)

\*Please note that this form is available for printing prior to completing the actual exam as a courtesy reminder to secure a proctor. It is strongly advised not to attempt to utilize this form without completing the exam as instructed.

I do hereby swear and affirm, under oath, that I personally completed this exam without any outside assistance including course material, other source material or assistance from any person(s). I further swear and affirm that I was engaged in the course for at least an amount of time equal to the credit hours prior to taking the examination.

\_\_\_\_\_  
Signature (Sign in ink only)

\_\_\_\_\_  
Date

## PROCTOR CERTIFICATION OF EXAM COMPLETION

(to be completed and signed by exam monitor)

I swear and affirm that I am over the age of eighteen years; that I am unrelated to the student identified in the Student Certification; that my execution of this certification was subsequent to the student's execution of the Student Certification; and that I personally observed said student during the completion of this examination witnessing that he/she received no outside assistance from any source in completing the examination.

\_\_\_\_\_  
Name of Student

\_\_\_\_\_  
Course Name/Number

\_\_\_\_\_  
Address where exam was taken

\_\_\_\_\_  
Date exam was taken

\_\_\_\_\_  
Beginning Time

\_\_\_\_\_  
Ending Time

**Type of monitor:** (Approved Monitors: librarian at public library, a lawyer, a corporate training department, a supervisor, an instructor, an office manager, etc. A proctor cannot be a co-worker, relative, friend or an acquaintance. More information can be obtained in the sponsor handbook.)

\_\_\_\_\_  
Describe Monitor

\_\_\_\_\_  
Print name of person administering test

\_\_\_\_\_  
Job Title of person administering test

\_\_\_\_\_  
Company/Agency Name

\_\_\_\_\_  
Business Phone Number

\_\_\_\_\_  
Business Mailing Address

\_\_\_\_\_  
Signature of person administering test (ink only)

\_\_\_\_\_  
Date