ACCIDENT & SICKNESS PROCTOR AND STUDENT AGREEMENT FOR LLQP CERTIFICATION EXAM

xam: O	nline (proctor will re	ceive student login information the day before the examination)	Date to write:
Р	aper(allow five bu	usiness days mail delivery)	Date to write:
READ To	HIS AGREEMENT CAREFUL below and according to the	LLY. You are responsible to fairly and honestly undertake the Certif following. Failure to adhere to this Agreement will see your Certific	ication Exam with the proctor ate revoked.
	IT BY STUDENT:		
	nt name)	warrant that I will be proctored by	the person named below
		cam. I will not use any study materials during the Exam. I v	
		ill not seek aid during the Exam, and I will not reveal the coudents. I accept my ethical responsibility to take the Exam	
		tion Exam is monitored and required by the Insurance Re	
unac	istand that the ocitined	mon Exam is monitored and required by the insulance req	guiators.
I have	e read and understand th	ne AGREEMENT BY STUDENT and I will abide by these terms	s and conditions.
Signa	ature of Student		
O.g.i.	ituro or ottadont	54.0	
ОСТО	R		
follow th	nese instructions. A candida	LY. You are responsible for the agreement below. It is a breach of eate of a proctor who does not follow these instructions will have his	s/her Certificate revoked. The
proctor	may face financial consequ	ences if the Exam is compromised and will not be permitted to prod	ctor future candidates.
	IT BY PROCTOR:		
I (prii	nt name)	warrant that I will proctor the stud	lent named above for the
LLQF	Certification Exam and	d that:	
1	I hold a professional d	esignation (CA, CMA, LL.B., P.Eng., M.D., CLU, CFP, CF	Δ) or I am or will be a
٠.		idate in his or her workplace or I am employed as a traine	
2		date does not use his or her program study materials or ar	
		paper or any electronic media.	iy other alao damig the
3.		date concludes the examination within the allotted two-hou	ur period of time.
	I will ensure there will be no communication with other examination candidates during the exam.		
		tribution of the examination, the student during the two-ho	
		ination at its conclusion.	, ,
		assistance to the candidate.	
7.		this form prior to the student taking the examination (allow	w at least 1 business day
	for online exams; 5 da		
		is taken fairly and honestly by the candidate.	
9.		son other than the candidate access to the examination or	
	reproduce the examina	ation by any means. I willl not read nor reveal the contents	s of the Exam.
I have	e read and understand th	ne AGREEMENT BY PROCTOR and I will abide by these terms	s and conditions.
		· · · · · · · · · · · · · · · · · · ·	
Signa	ature of Proctor		
Olgin		Date	
Positi	on or title: (please print)		
Comp	pany name:		
Addre	ess:		
		City: Prov: Postal	Code:

Daytime tel #<u>.:</u> E-mail: _____