



**STUDENT AFFIDAVIT
For On-Line Virginia Courses**

I certify that I personally completed each assigned module of instruction and that my work in this course will be based on my own personal efforts, unassisted by any unauthorized individual or resource. I received no assistance while completing the final exam. I understand that receiving unauthorized assistance or tampering with course results will invalidate my course credit and may be a cause of action under the real estate laws and regulations of the Commonwealth of Virginia.

Student Name- Please print, as it appears on your license

License # -If Post or CE

Address: Street

Address: City

State

Zip

Date of Birth: m/d/yr

Social Security Number

Student's Signature

Date:

NOTARY:

STATE OF: _____

COUNTY OF: _____

Taken, subscribed and sworn before me this _____ day of _____, 20__

My commission expires _____

Notary Public

Administrative Office:

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