Michigan Affidavit

Email all forms to:

The National Alliance for Insurance Education & Research Email: affidavit@scic.com

Affidavit of Webinar Completion

Student Information	on	
Student Name:		
Street:		
City:	State:	Postal Code:
Phone Number:	,	
Course Name: CIC	-Personal Lines	
Date		Section Title
		1. Personal Residential Coverages
		2. Personal Auto Coverages
		3. Personal Umbrella/Excess Coverages
		sonal Responsibility I Signed by Student
I	, certify that I participated in and attended all sessions of the web	
cast course	81783	
	(Michigan course ID #)	
Student's Signature		Date