



Edward Jones

Request for Continuing Education Credit

Follow these directions completely to avoid a delay in processing your request.

Within the same week as you complete the exam (states imposed time limit to report CE), send or fax the following;

- Checkboxes for: This completed request form typed or clearly hand printed; The completed Affidavit of Personal Responsibility; A copy of your grade report.

Send all other requests to: College for Financial Planning, Attn: Compliance, 8000 E. Maplewood Ave. Suite 200, Greenwood Village, CO 80111, E-mail: ce.compliance@cffp.edu Fax: (602)366-3391

Failure to include the above documents will result in the rejection of your request for CE credit. Please allow 4 weeks for processing. Certificates will be e-mailed to the address you provide below.

If you have questions, please call Student Services Center at 1-800-237-9990 option 2 or e-mail ce.compliance@cffp.edu.

Type or Print Clearly

1. Your full name, Mailing address, City, State, Zip, Last 4 digits of SS#, Student ID#, Daytime phone, E-mail address

2. Agencies from which you are seeking CE Credit: Insurance, CPA/CPE, CFP Board

3. College program(s) for which you are seeking CE credit: CFP Part 1-5, AAMS

4. Approximately how many hours did you spend to complete the course

For state insurance CE complete the following:

1. Your state insurance license number, NPN and/or SS# (SS# if required per state rules)
2. State for which you wish to receive CE credit:

I agree to pay any late fees imposed by the state if this request is submitted more than 1 week after passing the final exam. I have read and understand that there are proctor requirements that I must conform to in order to receive state insurance CE credit. I also affirm that the Affidavit of Personal Responsibility included with this request is complete and true.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Aug-09