



Proctor's Oath

As the Proctor for the SOFE test, I certify the following:

- I am a Certified Financial Examiner (CFE) in good standing with the Society of Financial Examiners (SOFE) or I have been duly authorized, in writing, to administer this examination on behalf of SOFE.
- I will be present during the entire course of the test to help maintain the integrity of the testing environment.
- I will be actively paying attention to the actions taken by the candidate, including from time to time actively observing and/or walking by the candidate to verify they are only on the test.com site and are not using other online or physical copy sources for assistance during the exam when testing in person.
- I will actively monitor the actions taken by the candidate, including observing unusual movements or sounds and the opening of other applications or documents during the examination when testing is done remotely.
- I have verified that the in-person or remote testing candidate did not bring any notes or other electronic devices (including a smart phone/watch) into the testing area other than a non-phone/watch based standard calculator.
- All notes taken by the candidate during the examination will be collected from the candidate, after the test, and properly disposed of (shredded).
- In order to maintain the reputation of the designation, I will be diligent to prevent and, if necessary, report any form of cheating during the test.

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|---------------------------------|--|
| Is proctor a CFE with the SOFE? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Print Proctor Name: | |
| Proctor Signature: | |
| Date: | |
| Proctor email: | |

Insurance Department or Firm Designee Validation (complete only if proctor is not a CFE):

I validate the above listed individual is employed with the insurance department or firm and has been designated the responsibility for proctoring SOFE examinations for testing candidates.

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|---------------------------------------|--|
| Name of Insurance Department or Firm: | |
| Are you a CFE with the SOFE? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Print Name: | |
| Signature: | |
| Date: | |
| Title: | |