

APPENDIX 5—CERTIFICATE OF PRELICENSING EDUCATION (Note: Must be on green paper)

I hereby certify that (name) has completed a prelicensing educational course which complies with the requirements in ch. Ins 26, Wis. Adm. Code, for the insurance line of (life) (accident & health) (property) (casualty). The last day of class for section B of this particular course was (date). I have verified the identification of this applicant by using:

- A Wisconsin driver's license
- A Wisconsin identification card
- Other (please describe)

Authorized Representative

Date

Name of Program