

# ***Certification Statement***

**“I certify that I personally completed each assigned module  
of online instruction”**

Course Title: \_\_\_\_\_

Course Completion Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Name (exactly as it appears on your license): \_\_\_\_\_

NC Real Estate License Number: \_\_\_\_\_

Date: \_\_\_\_\_

Please fax this form to Advantage Training Systems, Inc. at 1-888-417-4833.

