

**Employee's Affidavit of Training and Knowledge –
Credit Insurance Agent**

LIC CI 50 (Rev 05/08)

Producer Licensing Bureau

320 Capitol Mall
Sacramento, CA 95814-4039
(916) 492-3069
www.insurance.ca.gov

**Credit Insurance Agent
Employee's Affidavit of Training and Knowledge**
Pursuant to CIC Section 1758.92(a) (2)

1. Name of Employee: _____
2. Name of Employer: _____
3. Employer's California License Number: _____
4. The employee has read the credit insurance training material submitted to the commissioner by the employer. Yes No
5. The employee has received from the employer training in, and is knowledgeable about, the credit insurance products to be sold, ethics, and market practices. Yes No

I certify under penalty of perjury under the laws of the State of California, that I have carefully examined each of the questions asked in this **Employee's Affidavit of Training and Knowledge**, and that each of my responses are true and correct.

▶ _____
Signature of employee

Dated and signed this ____ day of _____ 20 ____ at City _____ State ____ Zip Code _____