

State of California
Prelicensing / Continuing Education Program Course
Attendance Record and Verification Form
LIC 446-5 (Rev 01/2021)

Department of Insurance

Curriculum and Officer Review Bureau – Education Unit
320 Capitol Mall
Sacramento, CA 95814-4309
Information (916) 492-3064
www.insurance.ca.gov

Course Number: _____

Course Title: _____

Provider Number: _____

Provider Name: _____

Class Location: _____
Street City State Zip Code

Class Date(s): _____

Verification:

I have reviewed and verified that the persons named on the attached Course Attendance Record Sheet(s), consisting of _____ pages, were present at this class during the times and days indicated.

Original Signature of Instructor/(Subject Matter Expert) Date

Printed Name of Instructor/(Subject Matter Expert)

Certification:

I have reviewed this Course Attendance Record Verification and the attached Course Attendance Record Sheet(s), and certify that I find them accurate and in order, to the best of my knowledge.

► _____
Original Signature of Provider Director/Subject Matter Expert Date

Printed Name of Provider Director/Subject Matter Expert

Course Attendance Record Sheet

Provider #:	Provider Name:				Page	of
Course #:	Course Name:					
Date:		Begin Time:		End Time:		Session of
Location:						Instructor/Subject Matter Expert:
Street		City		State	Zip	

Note: Those students who do not sign in and out will not be granted prelicensing or continuing education credit.

Time-in : AM/PM	Printed Name (Last, First M.I.)	Social Security Number* (Last 4 digits only)	Individual Insurance License #	Time-out : AM/PM	Signature I certify under penalty of perjury that these are my correct attendance times.

(Attach additional sheets if necessary)

*The Provider is required by the Department pursuant to Insurance Code Sections 1749, 1749.2, 1749.3, 1749.31, 1749.4, 1749.5, 1749.7, 1810.7 and CCR, Title 10, Chapter 5, Sections 2105.7(c)(1), 2105.10(b)(1), and 2188.5 to collect and maintain a unique student identifier that will properly identify students while protecting the confidentiality and privacy of this non-public personal information. The last four digits of the social security number or the individual insurance license number will allow the Department to assign credit to students who have completed prelicensing or continuing education courses.

[illegible]