

State of New Jersey Department of Banking and Insurance Consumer Protection Services PO Box 329 Trenton, NJ 08625-0329

Tel (609) 292-5316 ext 50552 Fax (609) 984-2792

Alternative Continuing Education Credit Application

Please fax this form and required documentation to Office of Consumer Protection Services at (609) 984-2792 or Mail to: Office of Consumer Protection Services, Department of Banking & Insurance, PO Box 329, Trenton, NJ 08625-0529

	Legal Name of Licensee:			
	Producer license reference number:	Expiratio	Expiration Date of License:	
	Address:			
	Phone #:	Fax #:	Fax #:	
	E-mail:			
I certify the attached documentation is true and accurate.				
		Producer Signature	Date	
	son for alte rnative credits. Check off the approp umentation.	riate box and attach requested doc	umentation. Credits cannot be approved with	out
	Passing an examination, which leads to an approved insurance designation. 12 credits for each passed examination. List the designation and provide the passing notice for each course.			
	Successful completion of a college level insurance course. Attach course description as it appears in college catalog and transcript showing successful completion and semester hours granted.			
	Maintaining an insurance designation with its own CE requirements. 12 credits applied for each full year the designation is maintained during the licensing cycle. Please complete CE 1-A form annually to receive 12 credits per year. This form is to be completed by a representative of the organization issuing the designation. The Insurance Designation – CE1A form may be obtained through our website at www.dobi.nj.gov.			
	Maintaining the continuing education requirements for an insurance producer license in another state. Identify the other state, and document satisfaction of their continuing education requirements. Individuals who maintain a resident insurance producer license in more than one state may benefit from declaring one state or the other as their home state.			

06-12-20