# CONTINUING EDUCATION RECORDKEEPING FORM

This form may be used to record earned credit hours for each Specific Qualification Standard requirement and/or the General Qualification Standard requirement. Please note that, under the General Qualification Standard, hours should be recorded by area of actuarial practice. Record the number of hours earned in as many columns as apply. This information should be retained for six years.

**Specific Qualification Standard Requirement** **Name:** _____

S-1 Statement of Actuarial Opinion, NAIC Life and A&H Annual Statement
S-2 Statement of Actuarial Opinion, NAIC Property and Casualty Annual Statement
S-3 Statement of Actuarial Opinion, NAIC Health Annual Statement

**General Qualification Standard Area of Actuarial Practice**

A-1 Designated Area of Actuarial Practice: _____

A-2 Designated Area of Actuarial Practice: _____

A-3 Designated Area of Actuarial Practice: _____

A-4 Designated Area of Actuarial Practice: _____

A-5 Designated Area of Actuarial Practice: _____

| ORGANIZED ACTIVITIES | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| **Date** | **Sponsor or Activity** | **Subject** | **S-1** | **S-2** | **S-3** | **A-1** | **A-2** | **A-3** | **A-4** | **A-5** |
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| **TOTAL ORGANIZED ACTIVITIES** | | | | | | | | | | |
| **OTHER ACTIVITIES** | | | | | | | | | | |
| **Date** | **Sponsor or Activity** | **Subject** | **S-1** | **S-2** | **S-3** | **A-1** | **A-2** | **A-3** | **A-4** | **A-5** |
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| **TOTAL OTHER ACTIVITIES** | | | | | | | | | | |
| **GRAND TOTAL** | | | | | | | | | | |