

UNIFORM CERTIFICATE OF ATTENDANCE

for approved Continuing Legal Education Activity

Within 30 days, this certificate shall be filed with the appropriate MCLE Board(s) or Commission(s)

Activity Identification

Sponsor: _____

Activity Title: _____

Date: _____ Location: _____ Activity #: _____

This program has been approved by the Kentucky Bar Association for a TOTAL of _____ CLE CREDITS.

Of this TOTAL _____ credits are designated as ETHICS CREDITS.

If this program has not been previously approved by the Kentucky Bar Association, attach the agenda (must include the time schedule) along with an application fee of \$10.00 to this certificate.

(PLEASE NOTE: KY CALCULATES CLE CREDITS BASED ON A 60 MINUTE HOUR EFFECTIVE JULY 1, 1995.)

Certification

By signing below, I certify that I attended the activity described above and am entitled to claim _____ CLE credits, including _____ ethics credits.

Name _____ Signature _____

Address _____

Date: _____ Social Security #: _____ KBA ID#: _____

Other MCLE states where you wish the PROGRAM SPONSOR to report CLE credit: _____

Acknowledgment

When required please complete the following (NOT required by the KY Bar Association):

Acknowledged by: _____
Sponsor Representative

ATTENDEE: Please complete & retain this portion for your records.

Sponsor: _____

Activity Title: _____

Date: _____ Location: _____ Activity #: _____

TOTAL CREDITS CLAIMED _____ ETHICS CREDITS CLAIMED _____