



VERMONT SUPREME COURT
OFFICE OF ATTORNEY LICENSING
BOARD OF MANDATORY CONTINUING LEGAL EDUCATION

Application for Accreditation of Continuing Legal Education Activity

Instructions

- **To review for credit, you must attach:**
 - Program time schedule or agenda (*times are required to compute approvable credit hours*)
 - Table of contents or equivalent
 - Faculty name(s) and credentials (*if not in brochure or description*)
- No fee is required with the application **unless** submitted more than 30 days after the CLE activity, in which case you must include a check for a late fee of \$50, made payable to Vermont MCLE Board.
- Please allow 3 to 4 weeks for processing.

Sponsoring Organization

Name of Organization: _____
Address: _____ City/State/Zip: _____
Email Address: _____ Telephone: _____

Program Description

Title of Program: _____
Date of Program: _____
Target Audience: ☐ Attorneys ☐ Clients ☐ Other(*specify*): _____

- Type: ☐ Moderated Programming: programming delivered via a format that provides attendees an opportunity to interact in real time with program faculty members or a qualified commentator who are available to offer comments and answer oral or written questions before, during, or after the program.
- ☐ Non-Moderated Programming with Interactivity as a Key Component: programming delivered via a recorded format that provides attendees a significant level of interaction with the program, faculty, or other attendees.
- ☐ Non-Moderated Programming Without Interactivity: programming delivered via a recorded format that does not have interactivity built into the program recording or delivery method.
- ☐ Other _____

Description of Materials: _____

Total minutes of instruction (*do not include breaks, meals, keynote speeches or introductions*): _____

Breakdown by Type: General: _____ Attorney Wellness: _____
Ethics: _____ Diversity and Inclusion: _____

Submitted by:

- ☐ Sponsor/Provider
Sponsor Representative: _____
- ☐ Individual Attorney
Attorney Name: _____
Email Address: _____ Telephone: _____

Date: _____ Signature: _____