Continuing Legal Education Application for Course Attendance Credit



The Florida Bar
Legal Specialization & Education
651 E. Jefferson Street
Tallahassee, FL 32399-2300
(850)561-5842 (Phone) (850)561-5660 (Fax)

ATTORNEY#	NAME:		
ADDRESS:			
CITY:		STATE:	ZIP:
PHONE:		FAX:	
ACTIVITY TITLE:			
SPONSOR NAME:			
DATE AND LOCATION OF	COURSE:		
PLEASE ATTACH A	COURSE BROCHURE A	ND/OR OUTLINE WHICH:	
(B) INDICATES TH	RIBES THE COURSE CON E TIME DEVOTED TO EA THE INSTRUCTORS	ITENT AND LEVEL OF PRESEI ICH TOPIC COVERED WITHIN	NTATION THE PROGRAM
CERTIFICATION CREDIT			
Indicate if credit is to be assessed for Board Certification.			
CERTIFICATION AREA(S):			
TOTAL MINUTES ON INST MINUTE HOUR)	RUCTION: (EXCLUDING	BREAKS, MEALS AND INTROI	DUCTIONS AND BASED ON A 50
TOTAL CRED	OIT (TOTAL MINUTES [DIVIDED BY 50 =	CREDIT HOURS)
If requesting Ethics, Profe appropriate box below.	essionalism, Substance	Abuse, and/ Mental Illness A	Awareness Credit, please check
☐ Ethics ☐ Professionalism	☐ Substance Abuse ☐ Mental Illness Awar	reness	
NOTE: If you have completed the further courses for evaluation.	ne minimum number of require	ed CLER hours, and are not seeking	g Certification credit, please do not submit

You may submit this application to clemail@flabar.org with the proper documentation.

Materials submitted for CLE credit review will be discarded once the credit has been determined. Should you wish to have your materials returned, please enclose a self-addressed stamped envelope.