

KY Bar Association, CLE Commission, 514 West Main Street, Frankfort KY 40601-1883
PHONE (502) 564-3795 www.kybar.org

KENTUCKY CERTIFICATE OF ATTENDANCE
for Approved/Accredited Continuing Legal Education Activity

Activity Identification

Sponsor: _____

Activity Title: _____

Date: _____ Location: _____ Activity # (REQUIRED): _____

Format of Activity:

Live (A live program takes place at a specific time and includes the opportunity to interact with or question the instructor. A video replay with a qualified attorney-facilitator, webcasts, and teleconferences are all "live" programs).

Technological (Technological programs are pre-recorded and available on-demand with no live interaction).

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 yet been approved by the Kentucky Bar Association, you must submit a Form 1 "Application for Accreditation of CLE Activity". You may search for accredited CLE Events on the KBA website.

Attorney Certification

PLEASE NOTE: KY CALCULATES CLE CREDITS BASED ON A 60 MINUTE CREDIT HOUR.

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

Name (Print)

Signature

Address

Date: _____ KBA ID # (REQUIRED): _____

Annual attendance deadline is June 30. Annual reporting deadline is August 10.

Credit for Faculty Preparation

Speaker Panel Member Author of Materials

Claim credit for your actual **participation/teaching/attendance** time above only. Claim **preparation** time below only.

You may claim credit for your preparation time, not to exceed 12.0 CLE credits per education year (divide the actual hours of preparation by 2 to determine CLE credit).

Hours of preparation: _____ ÷ 2 = _____ CLE credits. This total includes _____ ethics credits.