



Application for CLE Program Accreditation

Sponsor Name _____

Address _____

City/State/Zip _____

Phone _____ Fax _____

E-mail _____

Website _____

Title of Education Activity _____

Date(s) _____

Location (City/State) _____

Registration Fee \$ _____

Type of Law Code(s) _____

Admission Restrictions (if any) _____

Total minutes of instruction: General (non-ethics): _____
(not including breaks, meals or introductions)

Ethics: _____

Total Minutes: _____

NOTICE OF DECISION

The following action has been taken on this application:

Approved for _____ CLE credits, including
 _____ Ethics credits

Returned for more information (see note)

Denied. _____

Date _____

Method of Presentation:

Live Lecture Live Webcast

Live Video Online On-Demand

Teleconference Self Study Audio/Video

Advertised to:

Lawyers

Clients

Others (specify) _____

Description of materials to be distributed:

Looseleaf

Bound

Electronic

Approval by other jurisdictions:

Granted by _____

Denied by _____

Sponsor Representative _____

Title _____

Signature _____

Date _____

REQUIRED ATTACHMENTS TO THIS APPLICATION

Time Schedule

Table of Contents or equivalent

Faculty Name(s)

\$50 Application Fee (waived for programs offered free of charge)

Credit Card Number _____

Billing Address _____

City/State/Zip _____

Security Code _____

Expiration Date _____

SPONSOR OBLIGATIONS: Sponsor acknowledges and agrees to comply with all rules and regulations of the Wyoming State Bar Board of Continuing Legal Education. If you have questions regarding compliance, please contact Marie Ellis at mellis@wyomingbar.org or (307) 432-2103.