

CONTINUING LEGAL EDUCATION AFFIDAVIT
For Reporting Attendance at Approved Courses for Mandatory Continuing Legal Education
Group I - Reporting period July 1, 2006 - June 30, 2008

INSTRUCTIONS: Completion of this form is required of all attorneys who were licensed as "active" during the 06-08 licensing period only. Attorneys who were licensed as "inactive" during that period are not required to complete this form. This is a fillable form: to begin, click on a section and tab to all other sections. You may also print out this form and fill it out by hand. Attach a separate page if you need additional space. Once you have completely filled out this form, print out two copies and have one notarized. The additional copy is for your records. The fully completed, notarized form must be mailed to **ATTORNEY LICENSING, 2418 AIRPORT ROAD, SUITE 2, BARRE, VT 05641 BY JULY 2, 2008**. The complete rules and regulations of the MCLE Board, are available on our website at www.vermontjudiciary.org under the Continuing Legal Education link. A form for filing a make-up plan, for those who will not complete the CLE requirements by June 30, is available at http://www.vermontjudiciary.org/eforms/CLE_3.pdf Questions should be emailed to jud-attylicensing@state.vt.us

Attorney Name _____ Attorney License Number _____

A minimum of 20 hours of approved CLE is required each reporting period, including 2 in ethics.
 Self-study is limited to 10 credits.

Credits for alternative activities, such as teaching, must be recorded on the second page.

Sponsoring Agency Name	Title of CLE Course/Activity	Number of General Credits	Number of Ethics Credits	Date Course Attended/Viewed	Live or Self-Study

Total General Credits from Page 1	Total General Credits from Page 2	Total Ethics Credits from Page 1	Total Ethics Credits from Page 2	Total Credits (20+)

I swear or affirm that the information herein is, to the best of my knowledge, complete and accurate and that I did in fact attend, for the number of hours indicated, the courses listed. I also swear or affirm that I did not receive any compensation beyond expenses for any teaching credit I am claiming.

Subscribed and sworn to before me this _____ day of _____, 200____.

 Notary Public

 Comm. Expires

 Attorney's Signature

Attorney Name _____ Attorney License Number _____

Alternative CLE Activities Report Form

CLE Activity	Credit Limit per Reporting Period	Number and Type of Credits Earned	Date of Activity	Description (Name of Course Taught, Committee, etc.)
Moot Court/Trial Advocacy Judging	2			
Pre-approved Non-paid Scholarly Writing and Publication	2.5 for 1000 words 5.0 for 3000 words			
Reviewing Small Claims Cases in Superior Court	3			
Service as Acting Judge/Magistrate	3			
Teaching at Approved CLE	Unlimited, but cannot be part of your regular occupational activity			
Preparation Time for Approved Teaching	5			
Pre-approved Volunteer Committee Work	2			

Page 2 Total Number of General Credits	Page 2 Total Number of Ethics Credits

Please add totals in each category to totals on Page 1