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**CONTINUING LEGAL EDUCATION (CLE)**

**CERTIFICATE OF COMPLIANCE**

*Member Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Bar ID:\_\_\_\_\_\_\_\_\_\_*

A minimum of twelve (12) CLE hours, including one-hour of ethics, is required for annual renewal of your membership in the Paralegal Division. **ALL Division-sponsored and non-Division-sponsored CLE courses that comply with the MCLE Guidelines should be included in this form.** Please keep certificates of attendance for non-Division sponsored CLEs together with this form for submission with your annual renewal. You do not need a certificate for Division-sponsored CLE courses (the sign-in sheets for Division-sponsored CLEs are kept by the CLE Tracking Committee for proof of attendance in the event of an audit of your records) but you must still list them below. NOTE: If you have a problem meeting the CLE requirement for a particular renewal period or have questions regarding whether a particular CLE complies with the MCLE Guidelines, please submit a written explanatory statement/inquiry to the CLE Tracking Committee at pd-CLEcredits@sbnm.org. An extension may be granted if you are unable to meet your MCLE requirement due to extenuating circumstances.

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| **Date of CLE** | **Sponsored By** | **Title of Program** | **Pro Bono** | **Self-Study** | **General Hours** | **Ethics**  **Hours** |
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| ------------------- | -------------------------------- | TOTAL HOURS FROM CONTINUATION SHEET (if  applicable) |  |  |  |  |
|  |  | CARRY OVER CREDITS FROM  PREVIOUS YEAR\* |  |  |  |  |
| ------------------- | ------------------- = ----------------- | *TOTAL* **HOURS** *FOR PERIOD* |  |  |  |  |

*\** You may carry over a maximum of twelve (12) hours including one hour of ethics from the previous year, excluding pro bono and self-study hours.

IF NECESSARY PLEASE CONTINUE TO NEXT PAGE. IF NOT. PLEASE SIGN CERTIFICATION AND DATE AT THE BOTTOM OF NEXT PAGE.

*Member Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Bar ID:\_\_\_\_\_\_\_\_\_*

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| **Date of CLE** | **Sponsored By** | **Title of Program** | **Pro Bono** | **Self-Study** | **General Hours** | **Ethics**  **Hours** |
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I certify that the information contained in this Certificate of Compliance is true and accurate. Further, I certify that I attended each hour of the General CLE and Ethics programs identified in this Certificate of Compliance and have attached my certificates of attendance for non-Division sponsored CLEs. My CLE hours for the renewal period beginning on January 1, 20\_\_\_ and ending December 31, 20\_\_\_\_ total \_\_\_\_\_\_\_\_\_\_ hours, with a minimum of \_\_\_\_\_\_\_\_\_ hour of Ethics.

Signature of Member Date Signed