



**Commission on
Continuing
Legal
Education**
of the Supreme Court of Delaware
The Renaissance Centre
405 N. King Street, Suite 420
Wilmington, Delaware 19801
302-651-3941 • <http://courts.delaware.gov/cle>

Form 4

**Accreditation of an
Individual Program**

to be completed and submitted by an attorney
attending a non-approved program
seeking CLE credit

1. Name of sponsoring organization: _____
Address: _____
Telephone number of sponsor: (_____) _____
Name of Representative : _____
2. Title of program: _____
3. Date, City & State: _____
4. Writing surface available? _____
5. Method of Presentation:

a. _____ faculty in room with participants	d. _____ groupcast
b. _____ in-house	e. _____ satellite/simulcast
c. _____ monitored video replay	f. _____ online/telephonic
	g. _____ other: describe _____
6. Program was advertised to: _____ Lawyers _____ Others - specify _____
7. List any admission restrictions: _____
8. Method of course evaluation: _____ participant critique; _____ independent evaluator; _____ none;
_____ other - specify _____
9. Description of materials: Total number of pages _____; _____ looseleaf _____ bound.
Distributed _____ before program; _____ at program; _____ other
10. **Attach** a copy of the program agenda or other course materials containing a time schedule. A table of contents may not be substituted for this requirement.
If you did not attend the seminar in full, or if the seminar included concurrent sessions, please indicate sessions actually attended by highlighting or initialing segments on agenda.
11. Total number of Instructional Hours attended/to be attended, **including Enhanced Ethics**: _____
a) Total number of Instructional Hours attended/to be attended **in Enhanced Ethics only**: _____
12. **Attach** a completed copy of a certificate of attendance, signed by a representative of the sponsoring organization.
If applying for credit prior to seminar, please submit copy of attendance certificate, with attached copy of approved Form 4 application, within 45 days after program in order to ensure credit.

Applicant: _____ Date: _____
Address: _____

Phone: _____ Supreme Court ID# _____
Email: _____

Commission use only