

BI-ANNUAL NEW JERSEY ACCREDITED SERVICE PROVIDER REPORTING FORM

This form is to be filed no later than January 15th and July 15th of each calendar year.

Part I – Provider Information and Certification

Provider Name: _____

Provider Address: _____

Provider Representative: _____ Title: _____

E-Mail Address: _____ Telephone Number: _____

Provider acknowledges and agrees to comply with all New Jersey Rules (specifically Rule 1:42), as well as the Board on Continuing Legal Education’s policies and procedures, and certifies that the information provided in this reporting form is true and accurate.

Provider acknowledges that it owns the rights to its course’s content and/or has obtained all the needed permissions to utilize the course’s content, including written materials.

Provider Representative Signature: _____ Date: _____

Part II – Spreadsheet of Course Information – Altered forms will not be accepted.

Course Title: List all CLE courses conducted between January 1 and June 30 or July 1 and December 31, whichever is appropriate. Providers are presumptively approved for all CLE courses and, therefore, must include all courses on this form even if no NJ attorneys were in attendance. If the course was given multiple times, list the course title once with each date of presentation on a separate line.

Course Date: List the course date as xx/xx/xx. If the course took place during more than one day, provide the first and last day of the course as follows: 12/6 – 12/12/10.

Format or Method: Use the following abbreviations to explain the format or method of delivery of the course. L=faculty in room with participants; V=video/audio/DVD; S=satellite simulcast; C=tele/video conferencing; I=internet computer self-study; W=interactive web cast; O=on-line internet presentation

Fee Charged: Indicate the registration fee charged for admission to the course. If there were several fee options, please indicate the range, i.e. \$80 - \$130

Additional Fee: Indicate any additional fee that was charged to attorneys such as membership fees, processing or reporting fees, administrative fees, etc.

Number of Financial Hardship Application Received: Provide the number of attorneys who requested a reduced fee or waiver of fees to attend the course.

Number of Financial Hardship Applications Granted: Provide the number of attorneys who were granted a reduced fee or waiver of the fees to attend the course.

In-House Seminar: Provide a yes or no answer as to whether this course was offered to staff only or open to all interested attorneys.

Total Number of Attorneys in Attendance: Provide the number of attorneys that attended this course. Do not decrease the number based on attorneys who attended only part of the course and were awarded less credits than was accredited for the entire course.

Total NJ Attorneys Issued NJ Certificates of Attendance: Provide the number of New Jersey attorneys who participated in this course and were issued a New Jersey Certificate of Attendance.

Total Number of CLE Minutes: Provide the total number of CLE minutes for the course, including ethics and/or professional responsibility.

Minutes of Ethics or Professional Responsibility: Provide the number of minutes for ethics or professional responsibility that were included in the Total Number of CLE Minutes.

Appropriate for Certification Credits: Indicate whether the course was appropriate for credit in the following areas of specialty certification: CV=civil; CR=criminal; MA=matrimonial; WC=workers' compensation

Appropriate for Newly Admitted NJ Attorneys: Answer yes or no as to whether or not this course provides continuing legal education that would meet the Board's requirement for newly admitted NJ attorneys, which includes the following subject areas: NJ basic estate administration; NJ basic estate planning; NJ civil or criminal trial preparation; NJ family law practice; NJ real estate closing procedures; NJ trust and business accounting; NJ landlord/tenant practice; NJ municipal court practice; and NJ law office management.