

**INDIVIDUAL SUPPLEMENTARY APPLICATION - INTERDISCIPLINARY
(CCLE Form 14)**

Please email completed form to:
OHCLEapp@sc.ohio.gov
[Instructions for emailing CLE applications](#)

<p><u>Date Received by Office of Attorney Services</u></p>
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This form must be accompanied by a Form 6 or Form 8 and must be completed in its entirety in order for your application for accreditation to be considered. Incomplete applications will be returned unprocessed.

1. Is the sponsor of this activity primarily a sponsor of continuing legal education? Yes No
2. Is this activity advertised to professionals other than lawyers, or to non-professionals? Yes No
If yes, what profession?
3. Is this activity approved for continuing education credit in a discipline other than law? Yes No
If yes, what discipline?
4. Has this activity been accredited for continuing legal education credit in any other mandatory CLE state? Yes No
If yes, what state or states?

Please respond to questions 5 and 6 separately and in detail, using a separate sheet of paper, if necessary.

5. Please explain how this activity's subject matter will improve your professional competence as an attorney. (CCLE Reg. 406(A)).
6. Please explain exactly what legal services you provide that will be improved by your attendance at this activity, and how those legal services will be improved. (CCLE Reg. 406(B)).

Attorney Signature _____

Date _____