

THE SUPREME COURT OHIO
Commission on Continuing Legal Education
30 East Broad Street, Columbus, Ohio 43215-3431
(614) 644-5470

APPLICATION FOR EXEMPTION FROM EDUCATIONAL REQUIREMENTS OF RULE X

- 1. Attorney Name: _____ Attorney Registration #: _____
- 2. Address: _____ Telephone (____) _____
- 3. Application is hereby made for exemption from the educational requirements of Gov. Bar R. X., Section 3(A) that each attorney authorized to practice law in this state shall complete at least twenty-four credit hours of continuing legal education every two years.

Applicant is an attorney:

- A. On full-time military duty and does not engage in the private practice of law in Ohio. (Attach supporting documentation).
- B. Suffering from severe and prolonged illness or disability preventing participation in approved activities. (Attach a description of the illness or disability and appropriate supporting documentation).

OR

- 4. Application is hereby made for an exemption, not to exceed one year, based on special circumstances unique to the applicant, which constitute good cause for the grant of exemption.
- I enclose a description of the special circumstances unique to me, which constitute good cause for the grant of exemption. (Attach any other appropriate documentation).

OR

- 5. Application is hereby made for approval of a substitute program for compliance with Gov. Bar R. X., Section 3(A).
- A. I am an attorney who has a permanent physical disability that makes attendance at accredited CLE activities difficult. (Enclose a description of the disability and appropriate supporting documentation).

AND

- B. I enclose a description of the proposed substitute program for compliance and a statement of the number of CLE credits requested. (Regulation 304.4 permits inclusion in a proposed substitute program, courses of self-study and "special programs". Please describe with specificity).

The grant of an exemption under Rule X does NOT relieve an attorney of the duty to report his/her exempt status at the end of his/her biennial reporting period.

Applicant agrees to certify on each biennial report statement during a period of exemption, whether or not the reason for which the exemption was last granted has substantially changed.

Date

Signature

FOR CCLE OFFICE USE ONLY

Approved Denied Credit Hours. _____

Date _____

By _____