

**REQUEST FOR ANNOUNCEMENT OF ESTABLISHED SPONSOR SELF-STUDY ACTIVITY
(CCLE Form 24)**

Please mail completed form to:
The Supreme Court of Ohio
Commission on CLE
65 South Front Street, 5th Floor
Columbus, Ohio 43215-3431

Activity Code: _____
NOTICE OF DECISION
The following action has been taken on this application:
<input type="checkbox"/> APPROVED for _____ CLE credit(s), including _____ Professional Conduct Hours.
<input type="checkbox"/> ACCREDITATION DENIED. Reference _____
Date: _____ CLE Staff: _____

SPONSOR INFORMATION

1. Sponsor Number: _____		
2. Name and address of organization providing or sponsoring the activity (not the name of person applying). _____		
3. Website: _____		
4. Name of sponsor contact person: _____	5. Telephone Number: _____	6. Email Address: _____

ACTIVITY INFORMATION

7. Title of Activity: _____		
8. Live Technology: Date(s) Live Technology Program Held? _____ Methods of Delivery: (please check all that apply): <input type="checkbox"/> Live Webcast <input type="checkbox"/> Teleconference <input type="checkbox"/> Videoconference <input type="checkbox"/> Other _____		
9. Prerecorded Technology: Production Date of Original Program: _____ Date(s) On-Demand Program Available: _____ Methods of Delivery: (please check all that apply): <input type="checkbox"/> On Demand, please provide website URL: _____ <input type="checkbox"/> Mp3 <input type="checkbox"/> Mp4 <input type="checkbox"/> Audio/Video <input type="checkbox"/> CD/DVD <input type="checkbox"/> Other _____		
10. Has the sponsor developed a method of evaluation for this activity? <input type="checkbox"/> Yes <input type="checkbox"/> No Please note that a method of evaluation is required for the Activity to be eligible for CLE accreditation.		
11. Are course materials provided to attendees? <input type="checkbox"/> Yes <input type="checkbox"/> No Total Number of Pages: _____ When are materials distributed? <input type="checkbox"/> Before Program <input type="checkbox"/> At program <input type="checkbox"/> Electronic <input type="checkbox"/> Other, please explain _____		

REQUIRED DOCUMENTATION

12. All information requested MUST BE PROVIDED ON THIS FORM.		
<ul style="list-style-type: none"> • Attach a copy of the brochure/program schedule. • Provide evidence that the run time of the activity is an amount of time equivalent to the number of CLE hours requested. • Announcement of each CLE activity shall be filed no later than thirty days after the first presentation of an activity. 		

TOTAL HOURS REQUESTED

13. Please state the total hours of instruction for which you are requesting CLE credit, excluding opening and closing remarks and breaks:		
General Hours _____		
Professional Conduct Hours _____		
Total Hours _____		