

**IN-HOUSE APPLICATION SEATING & SPEAKER VARIANCE REQUEST FORM  
(CCLE Form 15)**

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

Date Received by Registration and Continuing  
Legal Education (CLE) Section

**This form must be accompanied by a 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 detail why you are not using at least one or more presenters who are not a member, partner, associate, client, or employee of the sponsoring organization. (CCLE Reg. 407.1(C)).
6. Please detail why you are not opening up the seating to at least 25% of attendees not associated with the sponsoring organization. (CCLE Reg. 407.1(D)).

Attorney Signature \_\_\_\_\_

Date \_\_\_\_\_