



MANDATORY CONTINUING LEGAL EDUCATION PROVIDER VERIFICATION OF ATTENDANCE

Use this form if you are unable to obtain verification of attendance from the course provider.

Course Provider:

Course Title:

Type of Course: LIVE In Person Webcast Teleconference Other _____
RECORDED Online On-Demand Video Online On-Demand Audio
 DVD CD MP3 Video Replay Telephonic Replay
 Other _____

Date(s):

Location(s):

This course has been approved for MCLE credit in Idaho: Yes No

If Yes, ISB Course No. _____

If No, an application for MCLE credit and a copy of the course schedule must be included with this certificate.

Name of Attendee: _____ ISB Member No. _____

THIS PORTION TO BE COMPLETED BY THE COURSE PROVIDER

The above listed attorney attended the entire course.

The above listed attorney did not attend the entire course.

(Please indicate the extent of the attorney's attendance by attaching a list of the sessions attended, attaching a copy of the brochure showing which sessions were attended, writing a brief explanation on the line below or providing some other information concerning the attorney's attendance.)

Comments: _____

Signature _____ Date _____

Attention Attorneys: This form must be signed by the course provider to be valid. Submit a copy of this completed form to the Idaho State Bar to have your name added to the Idaho State Bar CLE attendance records. If this course has not been approved for MCLE credit in Idaho, you must also submit an application for MCLE credit and a copy of the course schedule with this form.

Questions: Contact the MCLE Department of the Idaho State Bar:

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