

Colorado Association of Legal Support Staff
Application for Continuing Legal Education Award

1. Name of applicant:

2. Address:

3. Telephone: (____) _____ Fax: (____) _____
4. Local CALSS-affiliated Chapter/Member-at-Large:

5. This form applies to three-year period commencing: _____, 20__
6. REQUIRED ATTACHMENTS:
 1. Completed Form CLE-1a
 2. Completed Form CLE-2, if applicable
 3. Completed Form CLE-3, if applicable
 4. Completed Form CLE-4, if applicable
 5. Completed Form CLE-5, if applicable

I hereby certify that I have completed, during the applicable three-year period, a minimum of 45 units of continuing legal education, including at least 7 units specifically addressing legal or judicial ethics, in compliance with the Rules and Regulations Governing Continuing Legal Education Award.

Dated: _____, 20__

Signature of Applicant

CLE COMMITTEE USE:

Received: _____ (date)
Reviewed: _____ (date)
CLE Award issued: _____ (date)

Approved Not Approved
Comments: _____

CLE Committee Chairman