

**REQUEST FOR ANNOUNCEMENT OF 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:

- APPROVED for _____ CLE credit(s), including _____ Professional Conduct Hours.
- 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): Live Webcast Teleconference Videoconference
 Other _____
- 9. **Prerecorded Technology:**
Production Date of Original Program: _____
Date(s) On-Demand Program Available: _____
Methods of Delivery: (please check all that apply): On Demand, please provide website URL: _____
 Mp3 Mp4 Audio/Video CD/DVD Other _____
- 10. Has the sponsor developed a method of evaluation for this activity? Yes 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? Yes No Total Number of Pages: _____
When are materials distributed? Before Program At program Electronic Other, please explain _____

REQUIRED DOCUMENTATION

- 12. All information requested MUST BE PROVIDED ON THIS FORM.
 - 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 _____