

301 SW 10<sup>th</sup> Ave. Topeka, KS 66612 Phone: (785) 368-8201 www.kscle.gov File within 30 days of activity.

This form can be emailed to: kscle@kscourts.gov for review.

## Teaching Credit Application

Make sure your information is accurate. This form will serve as the affidavit for your participation. Hours will be added directly to your Kansas CLE transcript unless there are modifications to the credit requested.

Attorney: ł			Kansas Supreme Court Number:		
Address, City, State, Z	Zip:				
Kansas Activity (Approval) Number*			(*Program must be approved in Kansas to be eligible for teaching		
credit. If this program is no	ot already approved, plea	se complete and attac	h the Application for Approval of Cl	LE Activity and timed agenda. If you	
know the program has bee	n approved, but do not kn	now the approval numb	er, you may leave this unfilled.)		
CLE Activity Sponsor:					
Title of CLE Activity					
Date of Presentation:		Location	Location of Presentation/Online:		
Number of minutes of	of actual presentation	on:			
CLE	incl	Ethics, P	rofessionalism and/or	Law Practice Mgmt	
Number of minutes sp	pent in preparation fo	or teaching this cou	Irse:		
Additional hours spe	ent attending (Time I	NOT spent teachi	ng - attendance time shoul	d be on THIS form):	
CLE	incl	Ethics, P	rofessionalism and/or	Law Practice Mgmt	

## Affidavit

Kansas CLE will enter the approved hours directly in your Kansas CLE transcript based on the information on this form. Allow 30 days for processing. Please check your MyKSCLE account online to verify credits entered.

Kansas attorneys and judges may claim up to the maximum number of CLE credit(s) earned for teaching/attendance by executing and returning this ENTIRE form to Kansas CLE. This credit will not be entered into your Kansas CLE transcript unless your name and Kansas Supreme Court number are PRINTED CLEARLY and your signature appears in the spaces below.