

**THE NORTH CAROLINA STATE BAR
BOARD OF CONTINUING LEGAL EDUCATION**

217 East Edenton Street, Post Office Box 26148

Raleigh, NC 27611

(919) 733-0123

Email: CLEApplications@ncbar.gov

**TEACHER'S APPLICATION FOR CLE CREDIT
FOR TEACHING AT A LAW SCHOOL, GRADUATE SCHOOL, OR PARALEGAL SCHOOL**

NOTE: Please use this form to apply for CLE credit for courses taught at an ABA-accredited law school, a law school licensed by the Board of Governors of the University of North Carolina actively seeking ABA accreditation, graduate courses taught at an accredited university, or a paralegal or substantive law course taught at a paralegal school or program. Do not use this form to request teaching credit for other CLE programs.

A course syllabus outlining the course content must accompany this teaching form.

1. Name of Teacher: _____ Telephone: (____) _____
2. NC State Bar Membership Number: _____ E-mail: _____
3. Address: _____
4. Name of Educational Institution or Program: _____
5. Address: _____
6. Exact Title of Course: _____
7. Date(s) Course was taught: _____
8. How many credit hours were given to the class by the educational institution:

_____ semester credit hours (for schools on the semester system)

_____ quarter credit hours (for schools on the quarter system)
9. Requested Number of CLE Hours for Teaching
 - a. Semester Hours

_____ semester hours x 5 = _____ total number of CLE credit hours
 - b. Quarter Hours

_____ quarter hours x 3.5 = _____ total number of CLE credit hours
10. Please include the course syllabus.
11. Attorneys must also complete the mandatory CLE requirements outlined in Rule .1518 (b) of the CLE rules.

The teacher represents that the CLE activity (A) complies with the Continuing Legal Education Rules and Regulations including any amendments thereto, and (B) has not been previously disapproved by the Board of Continuing Legal Education.

Date: _____ Teacher's Signature: _____

FOR MORE INFORMATION ON CLE REQUIREMENTS VISIT:

www.nccle.org