

**SOUTH JERSEY PARALEGAL ASSOCIATION**

*A Non-Profit Corporation*  
P. O. BOX 355  
HADDONFIELD, NJ 08033  
[info@sjparalegals.org](mailto:info@sjparalegals.org)  
[www.sjparalegals.org](http://www.sjparalegals.org)

**CLE REPORTING FORM**

KEEP TRACK OF YOUR CLE CREDITS AND SUBMIT THIS VERIFICATION FORM WITH YOUR RENEWAL APPLICATION AND SUPPORTING DOCUMENTATION.

Continuing Legal Education (“CLE”) Requirements: Complete twelve (12) hours of CLE with two (2) of the twelve (12) hours being in ethics for every two (2) years’ renewal.

Please submit this form together with the required documentation for each CLE listed hereon. (Refer to the South Jersey Paralegal Association NJCP Plan to ascertain what programs will satisfy the requirements and how CLE hours are determined.) If necessary, this form can be duplicated and submitted with your Renewal Application.

**NAME OF APPLICANT:** \_\_\_\_\_

Number of CLE Credits/Hours	Title of CLE	Date CLE Held

By signing this form, I certify that the information contained herein is true and correct to the best of my knowledge.

\_\_\_\_\_

DATED: