

# Virginia MCLE Board

Virginia State Bar

1111 East Main Street, Suite 700

Richmond, VA 23219-0026

(804) 775-0577/MCLE@vsb.org

## CERTIFICATION OF ATTENDANCE (FORM 2)

Pursuant to Paragraph 17B, C and D of Section IV, Part Six, Rules of Virginia Supreme Court and MCLE Regulations. The information provided will be available for inspection by the public under the Freedom of Information Act. Complete all requested information and sign certification.

**Contact the sponsor first for Virginia approval information.** The Virginia certification of attendance and Virginia course ID has been provided to the sponsor for all Virginia approved programs.

**Certify Your Attendance Online at [www.vsb.org](http://www.vsb.org)**

Member Name: \_\_\_\_\_ VSB Member Number: \_\_\_\_\_  
Address: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
\_\_\_\_\_  
E-mail Address: \_\_\_\_\_  
\_\_\_\_\_  
City State Zip

Course ID Number: \_\_\_\_\_

Sponsor: \_\_\_\_\_

Course/Program Title: \_\_\_\_\_

Credits: \_\_\_\_\_ CLE ( \_\_\_\_\_ ) Ethics \_\_\_\_\_ Well-being

### CERTIFICATION

Date(s) Attended: \_\_\_\_\_ Location(s): \_\_\_\_\_

Delivery method: \_\_\_\_\_ Live or Group Video \_\_\_\_\_ \*Live Telephone or Live Webcast \_\_\_\_\_ \*Videoconference or Satellite  
\_\_\_\_\_ \* Internet/on-demand \_\_\_\_\_ \*CD-ROM \_\_\_\_\_ ♦ Video/DVD \_\_\_\_\_ ♦ Audio/CD \_\_\_\_\_ Other \_\_\_\_\_  
Setting: \_\_\_\_\_ Group (with other attendees) \_\_\_\_\_ \* Individual attendance at my location

*\*Distance learning programs require attendance form verified and provided by the course sponsor when done in an individual setting.  
♦Video and Audio programs require at least 2 attorneys in attendance*

By my signature below I certify

- \_\_\_\_ I attended a total of \_\_\_\_\_ (hrs/mins) of approved CLE of which ( \_\_\_\_\_ ) (hrs/mins) were in approved Ethics and \_\_\_\_\_ were in approved Well-being.  
\_\_\_\_ The sessions I am claiming had written instructional materials to cover the subject.  
\_\_\_\_ I participated in this program in a setting physically suitable to the course.  
\_\_\_\_ I was given the opportunity to participate in discussions with other attendees and/or the presenter (in real time or via e-mail.)  
\_\_\_\_ I understand I may not receive credit for any course/segment which is not materially different in substance than a course/segment for which credit has been previously given during the same completion period or the completion period immediately prior.  
\_\_\_\_ I understand that a materially false statement shall be subject to appropriate disciplinary action.

NOTE: Credit is awarded for actual time in attendance rounded to the nearest half hour.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

**MCLE Completion Deadline – October 31**  
**Deadline to Certify MCLE Approved Hours – December 15**  
**Subsequent Late Reporting Deadline – February 1**  
A \$100 fee will be charged for failure to comply with each deadline.