



CLE PROPOSAL FORM

GENERAL INFORMATION

Submitter's Name: _____ Date: _____

E-mail Address: _____

Telephone: _____

PROGRAM INFORMATION

I. Topic, Title, & Description

A. Topic: _____

B. Title: _____

C. Brief description of substance to be covered: _____

II. Has the program been previously presented? Yes No Unsure

If yes:

A. When and where? _____

B. What was your involvement? _____

III. Speakers

A. Number of Speakers Proposed: _____

B. Identity of Speakers (if known): _____

IV. Type of Program (Select One):

Panel Program Demonstration Lecture Combination

V. Start Time: _____ **AM/PM** **End Time:** _____ **AM/PM**

VI. Total Hours of CLE Instruction: _____

VII. Summary of written material which will be available for distribution:

A. Who will write the materials? _____

B. Is any of the material already written? _____

C. When can the material be completed? _____

VIII. What, if any, special equipment will your program require? _____

Indicate anything else which may be helpful for evaluating your proposal(s):

PLEASE SUBMIT COMPLETED FORM TO:
Fairfax Bar Association
4110 Chain Bridge Road, Suite 216
Fairfax, VA 22030
ATTN: MCLE/Special Events Coordinator
Email: fa@fairfaxbar.org; Fax: (703) 273-1274

(FBA Staff will forward to the CLE Committee for consideration.)