

## CREDIT REQUEST FORM

If you wish to receive **CLE credit**, this form, along with a completed program evaluation, **must be completed** and **returned** to Blank Rome's CLE Department at [cleforms@blankrome.com](mailto:cleforms@blankrome.com) within **5 business days** of the date of this program.

**Course Title:** How to Manage a Whistle Blower - or Enforcement

**Date:** 12/7/2022

**Name:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Substantive Hours:** 1.0    **Ethics Hours:** \_\_\_\_\_    **Total CLE Credit Hours Requested:** \_\_\_\_\_

**State(s) where you'd like Credits:**     CA     CT     NJ     NY     HRCI     WI

**Please include bar number if requesting credit in DE, FL, IL, OH, PA, TX, and VA.**

DE/DE Bar# \_\_\_\_\_     FL/FL Bar# \_\_\_\_\_     IL/IL Bar # \_\_\_\_\_  
 OH/OH Bar # \_\_\_\_\_     PA/PA Bar # \_\_\_\_\_     TX/TX Bar \_\_\_\_\_  
 VA/VA Bar # \_\_\_\_\_

Please enter the two codes that were provided during the presentation:

CODE #1 \_\_\_\_\_    CODE #2 \_\_\_\_\_