

WASHINGTON STATE BOARD OF CONTINUING LEGAL EDUCATION

Washington State Bar Association • 2101 Fourth Avenue, Suite 400 • Seattle, WA 98121-2330 • 800-945-WSBA • 206-443-WSBA • Fax: 206-727-8320

APPLICATION FOR APPROVAL OF CONTINUING LEGAL EDUCATION ACTIVITY FORM 1 (revised 6/30/03)

NOTE: 1) All Applicants, please submit a separate application for each different seminar. **2) Member applicants** applying on their own behalf and not on behalf of a sponsoring organization are **not** required to pay the application fee.

Application Date June 08, 2009	Applicant Telephone Number (405) 360-8776	Applicant E-mail Address rsringo@piaba.org
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1. Name and address of applicant (return address):
Public Investors Arbitration Bar Association
2415 A Wilcox Drive
Norman, OK 73069

2. Sponsor of activity: (name of organization sponsoring the activity)
Public Investors Arbitration Bar Association

3. Title of educational activity: **PIABA 19th Annual Meeting**

Check here if audio or video tape.

4. City/State of each presentation:
Marriott Sawgrass
Ponte Vedre, FL

5. Dates of each presentation:
(For A/V, give date originally recorded.)
October 14 - October 16, 2010

6. Name, professional/educational background, and practical/teaching experience of faculty (or attach program agenda):
Meeting Agenda attached with Speaker Biographies

7. Targeted audience – professional background of invited registrants:
Attorneys, Mediators, CPA's, Arbitrators, Paralegals
☐ Check here if in-house seminar ☐ Check here if in-house seminar is open to non-members of sponsoring firm (as space is available)

8. Describe materials to be distributed to participants (do not send course materials):
Outlines ☒ Text ☒ Authored by speaker(s) ☒ Typewritten Supporting documentation Total pages 400

9. Description of physical facilities (check all that apply):
☒ Classroom seating Theater seating ☒ Writing surface available Other – describe

10. Method of evaluation of program (check all that apply):
☒ Participant critique Independent evaluator Other - describe

11. Please provide a time schedule and agenda which includes the topics and the start and end time for each instruction session, lunch, and all breaks. There is space available on the reverse side of this form to complete this information (see Time Schedule of Course Presentation). You may also attach a document that provides the specific information requested. See attached agenda and time schedule

12. **SPONSOR:** Enclose non-refundable \$50 application fee

MEMBER: Applying on own behalf for course approval only

Applying for course approval and attendance

Bar Number

Office Use Only		
Act ID #: 259519		
<input checked="" type="checkbox"/> Approved	Total Credits 13.00	<input checked="" type="checkbox"/> Live <input type="checkbox"/> A/V
2.00 Including	1.00 Ethics Credits	
<input type="checkbox"/> Approved	Nexus Credits	(See 13 on reverse)
<input type="checkbox"/> CLE credit denied		
<input type="checkbox"/> This application has been placed on the agenda for the next MCLE Board meeting.		
<input type="checkbox"/> Please see attached materials.		
Ref: SDS		
<input checked="" type="checkbox"/> New	6-21-10	<input type="checkbox"/> Dup

ADD'L 1 hr ETHICS
13.00 total (includes 2.00 ethics) SDS 10-1-10

MAY 17 2010

5603

\$ 50 -

RECEIVED
SEP 2 2010
MSB REGISTRATION SERVICES DEPT