UNIFORM CERTIFICATE OF ATTENDANCE

The Mississippi Judicial College requests that this certificate be filed with the MJC within 30 days of an approved Continuing Judicial Education activity.

SPONSOR **Mississippi Judicial College (MJC)**

TITLE **Statewide Justice & Municipal Court Joint Zoom Meeting**

LOCATION **On-line Training** **DATE(S)** **5-7-2020**

This program has been approved for a total of **1.38** CJE credit hours based on a 50-minute hour, of this total **0.00** CJE credit hour(s) of this activity is/are devoted to instruction of ethics, professional responsibility or professionalism.

REMINDER: Introductory Remarks, Keynote Addresses, business meetings, breaks, receptions, etc. are ***NOT*** to be included in the computation of credits.

TO BE SIGNED AND DATED BY THE JUDGE/JUSTICE

By signing below, I certify that I attended the activity described above and am entitled to claim CJE credit hours, including Ethics Credits as stated below:

CJE credit hours _____ of this total _____ is/are dedicated to Ethics/Professionalism.

These CJE credit hours were earned through the following method:

☑ Attendance Only ☐ Instruction Only ☐ Instruction and Attendance

If CJE credit hours were earned through instruction, did you prepare any written materials, PowerPoint, etc... for your session(s)? ☐ No ☐ Yes

If you answered **Yes** to the instructional materials question, please provide a copy of your materials with this certificate.

_____ _____ _____

(Print Name of Judge/Justice) **(Signature)** **(Date)**

Mailing Address _____

City _____ **State** _____ **Zip Code** _____

Office Phone _____ **Office Fax** _____

E-mail Address _____

E-mail, Print, Scan, Fax or Mail this form along with a copy of the program agenda and written materials (if instructing) to the Mississippi Judicial College, Administrator of MCJE, Post Office Box 1848, University, MS 38677, Fax No. 662-915-7845. Questions or Concerns: cje@olemiss.edu or call 662-915-7857.

Please see Rule 3 CJE and Regulations 3.1, 3.2, and 3.7.1.