

JUSTICE MARIE L. GARIBALDI AMERICAN INN OF COURT FOR ADR

Seminar Title: _____

Date: _____ Location: _____ via Zoom

ATTENDANCE AFFIRMATION

I certify that I have attended, listened to, and/or viewed the above course in its entirety. Therefore, I request that I be awarded the applicable number of New Jersey CLE credits for this course.

[] Listened/Viewed Via Zoom

Course Code #1: _____ Course Code #2: _____

Print Name	Sign In	Time In	Sign Out	Time Out

PROGRAM EVALUATION FORM

	Failed to Meet Expectations	Needs Improvement	Met Expectations	Exceeded Expectations	Excellent
Overall Quality					
Written Materials					
Facility					
Technology					
<u>Instructors:</u> Bill Eddy, LCSW, Esq. Felicia Farber, Esq.					

Additional Feedback:

Topics and speakers, you would like to suggest for future seminars:

What can be done to improve this seminar?

Other comments:

FORM MUST BE RETURNED TO PAT DALY (pdaly@shdlaw.com) FOR CLE CREDIT