# CERTIFICATE OF ATTENDANCE FOR CALIFORNIA MCLE

**Top portion of form to be completed by the Provider**

**It is preferred that the form is pre-printed with the attendees name and bar number.**

Provider Name: American Constitution Society

Provider Number: 14004

Title of Activity: Drafting Policy for Movements: Turning Community Priorities Into Policy

Date(s) of Activity: November 19, 2026

Time of Activity: 4:00 PM - 5:30 PM EDT

Location of Activity (City/State): Long Island City, NY

This Activity qualifies for: Participatory ☑ Self-Study ☐

Total California MCLE Credit Hours for the above activity: 1.5 hours, including the following sub-field credits:

- Legal Ethics: _____
- Recognition and Elimination of Bias: _____
- Competence Issues: _____

***Bottom portion of form to be completed by the Attorney <u>after</u> participation in the above-referenced activity***

By signing below, I certify that I participated in all, or some*, of the activity described above and am therefore entitled to claim the following California MCLE credit hours:

Total California MCLE Credit Hours: _____, including the following sub-field credits:

- Legal Ethics: _____
- Recognition and Elimination of Bias: _____
- Competence Issues: _____

*(You may not claim credit for the subfields above unless the provider is granting credit in those areas above.)*

Print Your Name (clearly): _____

Your California State Bar Number: _____

Signature: _____

* partial participation hours must be pro-rated