

Supreme Court of the State of New York
Appellate Division
Second Judicial Department

ORIENTATION TO THE PROFESSION CERTIFICATE OF COMPLETION FORM

I, [print your name] _____, do hereby certify that I have completed the Appellate Division, Second Judicial Department, Orientation to the Profession program by accessing the video on the Court's web site on the following date(s) _____, 20____, and that I have reviewed the video in its entirety and obtained a copy of the course materials. The following codes were disclosed during the course of the program:

Code #1: _____

Code #2: _____

Code #3: _____

Code #4: _____

Code #5: _____

Code #6: _____

I request that I be awarded the applicable number of New York CLE credits for this course.

Signature

E-mail address