

SUPREME COURT OF VIRGINIA
Office of the Executive Secretary
100 North Ninth Street, Third Floor • Richmond, Virginia 23219
PHONE: 804.786.6455 • FAX: 804.786.1301

CERTIFICATION OF ATTENDANCE
CONTINUING EDUCATION FOR GUARDIANS AD LITEM FOR INCAPACITATED PERSONS -- § 64.2-2003

Attorney Name:

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Last Name	First Name	Middle Name
VSB #: _____		List <i>all</i> JUDICIAL DISTRICTS / CIRCUITS Where GAL Appointments Will Be Accepted
Office Phone: (_____) _____		_____
E-mail Address: _____		_____

Check this box if the Office of the Executive Secretary **has permission** to release your e-mail address only to organizations requesting such information for the purposes of advertising upcoming continuing legal education programs.

CONTACT INFORMATION AS ALTERNATIVE TO VIRGINIA STATE BAR ADDRESS OF RECORD*

*The guardian ad litem for incapacitated persons program receives electronically from the Virginia State Bar (VSB) your official address of record (i.e. name, address, phone number and e-mail address). This contact information is made available to Juvenile and Domestic Relations District Courts and the public, and is used by the Office of the Executive Secretary, Supreme Court of Virginia, to contact you regarding your qualification as a guardian ad litem. Complete this section **ONLY** if you want the Office of the Executive Secretary to use an alternate address, phone number, and/or e-mail address for the purposes noted above.*

Address: _____	Office Phone: ** (_____) _____
_____	E-mail Address: _____
_____	<i>Note: E-mail address is <u>not</u> made available to the public.</i>

** Please do not provide a cell phone unless you want to receive all phone calls related to GAL appointments at that number.

Sponsor: Virginia Academy of Elder Law Attorneys

Course Title: "2017 Annual Meeting"

Approved GAL Credit Hours: 2.50 hours

The following sessions have been approved by the Office of the Executive Secretary, Supreme Court of Virginia, for continuing education credit for *qualified* guardians ad litem for incapacitated persons. Please indicate the sessions you attended.

____ 2017 Virginia Legislative Update (1:30 p.m. – 2:15 p.m.)

____ HIPAA Compliance for the Elder Law Attorney (2:30 p.m. – 4:00 p.m.)

CERTIFICATION

Course Date: September 18, 2017

I attended a total of _____ (hrs./min.) of CLE credit hours or program hours.
NOTE: Credit is awarded for actual time in attendance rounded to the nearest half hour.

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Date	Signature

* Providing this alternative contact information will not change your address with the VSB or the address any other department within the Office of the Executive Secretary has on file for you. This includes the Fiscal Services Department, which processes all payment vouchers.