



The Section of Family Law is currently seeking CLE program proposal for its Spring 2006 CLE Conference scheduled May 3-6 in Washington, DC. Please use the CLE Proposal Form attached below for your program submission. All proposals will be reviewed by the Section's CLE Committee. Completed proposals must be submitted to Sena Leach via facsimile (312-988-6800) or by e-mail ([LeachSe@staff.abanet.org](mailto:LeachSe@staff.abanet.org)) by close of business July 14, 2005.

**AMERICAN BAR ASSOCIATION  
SECTION OF FAMILY LAW  
CLE PROPOSAL FORM**

**Submitter's Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**Address** \_\_\_\_\_

\_\_\_\_\_

**Telephone: Office** \_\_\_\_\_ **Home** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**Committee Submitting Proposal (if applicable):** \_\_\_\_\_

**Committee Contact:** \_\_\_\_\_

*(The committee contact will be responsible for managing all aspects of the production of this program)*

**I. Topic of Program:** \_\_\_\_\_

\_\_\_\_\_

**A. Alternative Title:** \_\_\_\_\_

**B. Second Alternative Title:** \_\_\_\_\_

**II. Brief description of substance to be covered:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**III. Has the program been previously presented:** \_\_\_\_\_

**A. When and where:** \_\_\_\_\_

\_\_\_\_\_

**B. What was your involvement:** \_\_\_\_\_

\_\_\_\_\_

**IV. Number of speakers proposed:** \_\_\_\_\_

**Type of Program**

Panel Program \_\_\_ Demonstration \_\_\_ Lecture \_\_\_ Combination \_\_\_

**V. Length of program:** \_\_\_\_\_

**VI. Good reason why program should be more than 3 hours (programs are one to three hours)** \_\_\_\_\_

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**VII. Identity of speakers (if known)**

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**VIII. Why should your program be selected over other programs?**

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**IX. Summary of written material which will be available for distribution:** \_\_\_\_\_

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**A. Who will write the materials:** \_\_\_\_\_

**B. Is any of the material already written:** \_\_\_\_\_

**C. When can the material be completed:** \_\_\_\_\_

**D. Explain in detail whether the material is or will be of a quality and interest to be published and marketed by the section:**

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**X. Please list all CLE Programs which you produced during the past 5 years or in which you have recently participated:**

**ABA Programs:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Other: (identify Bar or Group)** \_\_\_\_\_

\_\_\_\_\_

**XI. Other comments helpful for evaluating your proposals:**

\_\_\_\_\_

\_\_\_\_\_

**XII. What, if any, special equipment will your program require:**

\_\_\_\_\_

**XIII. If you have any suggestions for CLE programs either at the next section meeting or at some other location, please let us know.**

\_\_\_\_\_

(Signed)

**Thank you for your interest and participation.**

**PLEASE FAX OR SEND COPIES OF COMPLETED FORM TO:**

**Sena Leach  
321 N. Clark  
Chicago, IL 60610  
FAX 312-988-6800**

**Section Staff will forward on to CLE Committee Chairs and CLE Committee**