

New York State Certified Paralegal Renewal Application

Instructions:

Please read all instructions carefully before completing the application.

- 1. **Application** must be complete and include all appropriate verification and **CLE** information to be considered by the Certification Committee. *Please do not mail application*.
 - → Submit application and documentation via email to ESAPA.CertificationChair@gmail.com
- 2. Be sure to complete the **Verification** on page two of the application which must be notarized.
- 3. Application will not be processed until **payment** is received. Checks should be made payable to:

Empire State Alliance of Paralegal Associations P.O. Box 14262 Albany, NY 12212-4262

Renewal Application Fee				
☐ \$30 (member of sponsoring association*)				
□ \$50 (non-member*)				

Personal Information (Must provide complete addresses including city, state and zip code):

Name:			
Other / Prior Name(s):			
Home Address:			
Phone No.:		□ Work	□ Personal
Email Address:		□ Work	Personal
Employer:			
Employer Address:			
* Do you have membership	in one of ESAPA's member associations?	□ yes	□ no
If yes, local paralegal	association:		

Documents Required (must be submitted with application):

The NYSCP® must complete **12 hours of Continuing Legal Education (CLE)** in substantive legal content every two (2) years, and at least one (1) of the 12 hours shall be in Ethics. All CLE credit hours in ethics must be from specifically designated ethics credit hours, and such designation must be clearly stated on the CLE certificate. Three (3) carryover credits from your immediate prior reporting period can be used towards your current reporting period (if you had more than 12 credits). **Last reporting period CLE Credit Summary must be submitted with renewal application.**

Continuing Legal Education Credits obtained directly from or pre-approved by the following organizations or entities are deemed pre-approved by ESAPA as a proper organization or entity to grant Continuing Legal Education credits and will be accepted by ESAPA:

- ★ ESAPA;
- ★ ESAPA member associations;
- ★ all bar associations:
- ★ Courts of all jurisdictions within the United States;
- ★ Inns of Court:
- ★ National Federation of Paralegal Associations, Inc. (NFPA), National Association of Legal Assistants, Inc. (NALA) or American Alliance of Paralegals, Inc. (AAPI); either sponsored by them or bearing their accreditation on the certificate of attendance;
- ★ approved CLE providers pursuant to the New York Unified Court System NY Courts CLE.pdf; and
- ★ Law firms and in-house legal departments (at the discretion of ESAPA).

Each CLE certificate provided in support of a renewal application MUST bear the name of the provider, title and/or topic of the CLE course, the entity approving CLE credits, the name of the attendee, the date, the amount of credits conferred, and bear a sponsor signature. ESAPA will not accept certificates which do not bear all of the required information. **Complete and submit the CLE Summary Sheet on page 3**.

Verification:

By submitting this renewal application, I understand that the fee is non-refundable regardless of the outcome of my application review. I also understand my payment will be processed at the time of submitting this application.

The information provided herein is true to the best of my knowledge and the documents provided herewith are true and accurate copies of the originals.

	Signature of NYSCP® Renewal Applicant
STATE OF NEW YORK) COUNTY OF) ss.	: :
On the day ofappeared	, 20, before me, the undersigned, personally (Applicant) known to me or proved to me on the
basis of satisfactory evidence to be the in acknowledge to me that he/she/they executed	dividual whose name is subscribed to the within instrument and the same in his/her/their capacity, and that by his/her/their signature upon behalf of which the individual acted, executed the instrument.
Notary Public	

CLE Credit - Su	ummary Sheet
Reporting period: through mm/dd/yy r	(Two years prior to Renewal Date) mm/dd/yy
1 ethics credit required; total of 12 credits required	CLE CREDITS EARNED

Renewal Applicant Name:

Date	Course Description	Sponsor Name	Practice/ Skills	Ethics
Carryover Cre (* Maximum of 3 p	dits* from the prior reporting period, if apporting from immediate prior reporting period)	licable.		
		TOTAL CREDITS $ ightarrow$		

Note: If this is not your first CLE submission, attach prior reporting period CLE credit summary.