

**CONTINUING LEGAL EDUCATION EVALUATION
FORM 1.2 NJ CLE CREDITS (Pending Approval)**

NAME (required) : _____

NAME OF COURSE: Neurodiversity in the Workplace

FACILITY: Interactive Zoom Presentation September

DATE/TIME: February 27, 2024 12:00 p.m. – 1:00 p.m.

COURSE CODES (required):

By signing this certificate, you certify that you attended the activity described above and are entitled to claim the amount of credits 1.2 hours of total NJ CLE credit.

Signature _____

Please email this form to Christina Surretsky at christina@ksbraniganlaw.com

OPTIONAL: Please evaluate the presentations for this CLE program. If you rate a panelist/moderator/presentation “poor” please explain why in the comment section in order that we may further improve this program.

	Excellent	Good	Fair/ Average	Poor
Presenters:				
Beth P. Zoller				
Natalie Hiott-Levine, Esq.				

COMMENTS:

HOW DID YOU LEARN OF THIS SEMINAR? _____