



CALIFORNIA MCLE SELF-STUDY CERTIFICATE

Provider Orrick, Herrington & Sutcliffe

Attorney Name _____

California Bar Number _____

Title of Program _____

Date of Activity _____

FORMAT: _____

Total Hours _____

Specific Application of Hours:

Legal Ethics _____

Competence (substance abuse) _____

Elimination of Bias _____

General _____

Implicit Bias _____

KEEP FOR YOUR RECORDS



California MCLE Activity Evaluation Form - please return to mwoods@orrick.com and jgracey@orrick.com

Course: Raising in a Down Market: What You Need to Know and How to be Prepared			Date: 03/08/2023
Location	Format	Time	Instructors
Los Angeles (Los Angeles, CA)	Webconference	10:00-11:00AM PST	Pollick, Joshua R.
New York (New York, NY)	Webconference	1:00-2:00PM EST	Harris , Aaron
CA CLE Credits:	1 General		
NY CLE Credits:	1 PP		

1. Did this program meet your educational objectives?* (Rating)

Please rate on a scale of 1 to 5 (5 being the highest, best or most; 1 being the least, lowest or worst).

5 4 3 2 1

2. Did the environment have a positive influence on your learning experience?* (Rating)

Please rate on a scale of 1 to 5 (5 being the highest, best or most; 1 being the least, lowest or worst).

5 4 3 2 1

3. Were you provided with substantive written materials?* (Rating)

Please rate on a scale of 1 to 5 (5 being the highest, best or most; 1 being the least, lowest or worst).

5 4 3 2 1

4. Did the course update or keep you informed of your legal responsibilities?* (Rating)

Please rate on a scale of 1 to 5 (5 being the highest, best or most; 1 being the least, lowest or worst).

5 4 3 2 1

5. Did the activity contain significant current professional content?* (Rating)

Please rate on a scale of 1 to 5 (5 being the highest, best or most; 1 being the least, lowest or worst).

5 4 3 2 1

6. Please rate the faculty * (Rating, Instructor)

Overall teaching effectiveness

Instructor: Pollick, Joshua R.

5 4 3 2 1

Instructor: Harris , Aaron

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7. Please rate the faculty * (Rating, Instructor)

Effectiveness of teaching methods

Instructor: Pollick, Joshua R.

5 4 3 2 1

Instructor: Harris , Aaron

5 4 3 2 1

8. Please rate the faculty * (Rating, Instructor)

Significant current knowledge of subject

Instructor: Pollick, Joshua R.

5 4 3 2 1

Instructor: Harris , Aaron

5 4 3 2 1

9. Name of Participant (optional): (Fill in the blank)

Additional Comments:

* Required Question



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