



Approval of Primary Training and CDRE Activity: In-Person or Live Virtual Training

1. This form should be submitted by programs or individuals sponsoring a live training event (either in-person or live virtual). It is intended for live primary training or live CDRE activities that require approval prior to their presentation. Individuals who have attended a live presentation that was not state approved may also use this form to request CDRE credit, in accordance with Supreme Court Rules 916 and 917(b). This form should not be used for prerecorded (on-demand) presentations.
 - a. Sponsors applying for CDRE credit should not complete Part B.
 - b. Individuals seeking CDRE credit for a live presentation they have attended, but which has not been state-approved must complete all parts.
2. NOTE: Only calculate and include the total minutes *actually attended* in Part C. Submit one application for each activity.
3. Approved individuals must be provided with high-quality instructional materials at or before the primary training or CDRE activity.
4. Notice of approval will be emailed to the program or individual seeking CDRE credit for a live presentation. For approved programs, approval of CDRE credit for an activity is valid until the next calendar year pursuant to the limitations of Rule 917(b)(2).
5. Completed applications (and any attachments) should be submitted to the Director of Dispute Resolution via mail to:

Office of Judicial Administration
301 SW 10th Avenue
Topeka, KS 66612-1507
adr@kscourts.gov

Required Attachments:

- A copy of the final version of the timed agenda of the activity.
 - Indicate beginning, ending, and break times.
 - Indicate on the agenda for which items you seek CDRE credit (specifying any domestic violence and/or ethics components).
- A brochure, advertisement, or announcement for the activity.

INCOMPLETE APPLICATIONS WILL BE RETURNED WITHOUT REVIEW

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Part A: Sponsor of Activity: Program or Individual Information (Required on all applications)

Organization/Program: _____
Contact Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
Email (*Required*): _____
Web Address: _____

Part B: Individual Information (Should only be completed by individuals seeking CDRE credit for a live presentation they have attended, but which has not been state-approved)

Name: _____
Address: _____
City, State, Zip: _____
Phone: _____
Email (*Required*): _____

Part C: Activity Information (Required on all applications)

Title of Activity: _____
Original Date of Activity: _____
Location of Activity: _____

Audience this activity is directed and advertised to. List all groups invited:

- 1.
- 2.
- 3.

Are "high quality" instructional materials distributed before or at the activity? ☐ Yes ☐ No

Was an evaluation distributed for the activity? ☐ Yes ☐ No

Is there a registration fee for the activity? ☐ Yes ☐ No

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Hours Calculation

Total minutes of instruction: _____
Divided by 50 minutes equals: _____ CDRE Hours
Total minutes devoted to:
 Domestic Violence Topics: _____
 Ethics: _____

Part C: Verification

Program

I certify that this activity meets all rules and regulations required for primary training or CDRE credit in the State of Kansas, and that the above information (including attachments) is true and complete.

Program Representative Name

Program Representative Title

Signature

Date

Individual

I certify that this information is true and complete. I have calculated my hours in Part C based on my individual attendance. Based on this information, the Office of Judicial Administration will enter the approved hours directly into my record unless a modification is required.

Name (Print)

Signature

Date

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