

Sullivan & Cromwell LLP

Individual Remote Participation Verification Form

Instructions:

Please complete the fields below, then send to Donna Kramer at kramerd@sullcrom.com.

Program Title: **ID2382 European Capital Markets Developments**
Program Date: **Thursday, April 30, 2020**

CLE Code:

A CLE code will be announced during the program.
To receive credit for the program, you must enter the announced code.

I affirm that I have completed the above program and am entitled to receive the continuing legal education credit assigned to this program.

Participating Attorney's
Full Name (Please Print):

Participant's Organization:

Email Address:

Attorney Bar Admissions:

Attorney Signature:

Note about signatures:

If signing electronically, please follow this format: /S/ Your Name

If signing on behalf of someone else, please follow this format: /S/ Participant's Name (your initials)

Please send to Donna Kramer at kramerd@sullcrom.com.

Sullivan & Cromwell LLP

Evaluation Form

Please send to Donna Kramer at kramerd@sullcrom.com.

Program Title: **ID2382 European Capital Markets Developments**

Program Date: **Thursday, April 30, 2020**

1. Educational Objectives:

How well did this program meet your educational objectives?

Poor Fair Good Excellent

2. Content:

To what extent did the program contain significant current professional content?

Poor Fair Good Excellent

3. Legal Responsibilities:

To what extent did the program inform you of your legal responsibilities?

Poor Fair Good Excellent

4. Written Materials:

Please rate the written materials:

Poor Fair Good Excellent

5. Facilities:

Please rate the environment:

Poor Fair Good Excellent

6. Instructor(s):

Please rate the knowledge, teaching methods, and overall effectiveness of the instructors:

Poor Fair Good Excellent

Comments:

Please send to Donna Kramer at kramerd@sullcrom.com.