<table>
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<th>Date</th>
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| Friday, January 10, 2014 | **How to Make Ethical Practice Management a Habit in Your Practice**
8:45 a.m. - 10:45 a.m. - 1 ethics & 1 law practice management credit
Sheryl Randazzo, Esq. - Randazzo & Randazzo LLP |
|               | **Landlord Tenant Basics**
11:00 a.m. - 1:00 p.m. - 2 skills credits
Hon. Stephen L. Ukeiley - Suffolk County District Court |
| Sunday, January 12, 2014 | **State Court Criminal Trial Evidence Issues**
9:45 a.m. - 11:45 a.m. - 2 professional practice credits
Hon. Mark Cohen - New York State Supreme Court |
|               | **Child Support Modifications**
12:00 p.m. - 2:00 p.m. - 2 skills credits
Hon. Cheryl Joseph-Cherry - Suffolk Support Magistrate |
| Friday, January 17, 2014 | **2013/2014 Ethics Update**
8:45 a.m. - 10:45 a.m. - 2 ethics credits
Professor Lawrence Raful - Touro Law Center |
|               | **Bankruptcy Basics**
11:00 a.m. - 1:00 p.m. - 2 skills credits
Professor Leif Rubinstein - Touro Law Center |
| Sunday, January 19, 2014 | **§1983 Civil Rights Actions**
9:45 a.m. - 11:45 a.m. - 2 professional practice credits
Professor Martin Schwartz - Touro Law Center |
|               | **Privacy and Data Protection Laws and Practices**
12:00 p.m. - 2:00 p.m. - 2 professional practice credits
Professor Jonathan Ezor - Touro Law Center |

**REGISTRATION:**
You can register by e-mail at alumni@tourolaw.edu or send your completed registration form to:
Touro Law Center, Alumni Office, Perfect for Practice, 225 Eastview Drive, Central Islip, New York 11722. You may also fax your completed registration form to (631) 761-7069.

**DISABILITY ASSISTANCE:** If you require assistance related to a disability, please let us know.

Name: ___________________________ Class Year: ___________ Business Name: ___________________________

(B) Address: ___________________________ City: ___________ State: ______ Zip: ___________

(B) Phone: ___________________________ (B) Email: ___________________________

(H) Address: ___________________________ City: ___________ State: ______ Zip: ___________

(H) Phone: ___________________________ (H) Email: ___________________________ Cell Phone: ___________