

NameCPD YearCPD Year									
Continuing Professional Development – minimum 10 hours per year, with an additional 5 hours for each additional strand.									
Date of study	Study Activity(name of provider and venue where relevant)	General Description	Hours Recorded	Supporting Evidence*					

AP18 V7 Jan 15

^{*}Evidence must be a copy of a certificate or course confirmation. If this is not available a summary of learning must be provided. Please complete separately and attach.



If applicable:

CPD carried out as a result of Change in requirements – hours registered here do not contribute to the annual CPD minimum

Date of study	Study Activity(name of provider and venue where relevant)	General Description	Hours Recorded	Supporting Evidence*

CPD carried out as a result of a QA failure or other disciplinary action - hours registered here do not contribute to the annual CPD minimum

Date of study	Study Activity(name of provider and venue where relevant)	General Description	Hours Recorded	Supporting Evidence*
			N/A	

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^{*}Evidence must be a copy of a certificate or course confirmation. If this is not available a summary of learning must be provided. Please complete separately and attach.