



PERSONAL DETAILS

| Name | Mem. No. |
|----------------------------|----------|
| Your job title | |
| Your main responsibilities | |
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CPD RECORD

This form is applicable for recording CPD activities, whether you measure your CPD through focus on learning outcomes or on hours spent on the relevant activity. Its use is optional, and other means of recording CPD that meet the requirements of the CPD regulations and guidance may be used if preferred.

| Planning – what do you need to do? | Action | Outcome | Time |
|---|---|--|---|
| CPD goals/learning needs/training gaps/activites | CPD done | Learning outcomes and reflection | Hours |
| What are your learning needs/training gaps? What do you already do well and where could you improve? What learning activities will help you to meet your needs? | What is the progress of your learning? Have you completed the planned activities? This is the section where you should record courses attended, webinars watched, publications read etc in order to meet the CPD requirement identified. | What have you learned as a result of each activity? How useful has the learning been? Have you achieved the goals you set yourself? How did or will this impact on your work? Any follow up needs identified? | How long did you spend on this activity? |
| | Activities and date completed | | |

CPD RECORD (continued)

| Planning – what do you need to do? | Action | Outcome | Time |
|---|---|--|---|
| CPD goals/learning needs/training gaps/activites | CPD done | Learning outcomes and reflection | Hours |
| What are your learning needs/training gaps? What do you already do well and where could you improve? What learning activities will help you to meet your needs? | What is the progress of your learning? Have you completed the planned activities? This is the section where you should record courses attended, webinars watched, publications read etc in order to meet the CPD requirement identified. | What have you learned as a result of each activity? How useful has the learning been? Have you achieved the goals you set yourself? How did or will this impact on your work? Any follow up needs identified? | How long did you spend on this activity? |
| | Activities and date completed | | |
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