



CPD LEARNING ACTIVITY RECORD FORM

Please complete and return to SAPIK

YEAR: _____

This is the record of CPD learning activities attended each year. It must be duly completed and accurately reflect CPD learning activities. Please attach SAPIK CPD certificates. This template of the last three years together with SAPIK CPD certificates should be submitted to SAPIK when audited.

SAPIK registration number:						
Surname:						
First Names:						
Year of First Registration with SAPIK:						
CPD points (Please attach SAPIK CPD certificates)						
Name of organization	Name of Learning activity *	DATE		Ethic points (if any)	CPD points	Total
		From	To			

Name of organization	Name of Learning activity *	DATE		Ethic points (if any)	CPD points	Total
		From	To			
TOTAL:						

I, the undersigned, certify that the information contained in this CPD record form and the attached SAPIK CPD certificates are correct in all respects.

SIGNATURE

DATE