

APPLICATION FOR CPD CREDIT APPROVAL

Registrant's Name: _____ Professional Designation: _____

Title of activity:

Time spent on activity:

Please provide a detailed description of the activity and how it contributes to your CPD portfolio:

Please provide any supporting documentation for this activity (Program, agenda, hyperlink, receipt, literature, drafts):

Complete details and supporting documentation provided by you will enable the Credentials Committee to make a timely decision. Please add any additional information to support your request.

COMMITTEE USE ONLY

Date:	Approval (Y/N):	# of Credits:
Rationale for decision:		

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