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**Detailed Record of CPD Activity**

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| --- | --- | --- | --- |
| Name: |  | Year: |  |

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| --- | --- | --- | --- | --- | --- | --- |
| Activity: |  | | | | | |
| Date: |  | | | | | |
| Type of activity: | Work-based learning | Professional activity | Formal/ educational | Self-directed learning | Other | |
| OUTCOME:  Reflection on and analysis of learning experience.  What knowledge or experience did you acquire that will improve your working practice or professional development?  How has the service benefited? |  | | | | | |
| Signature of manager/mentor: |  | | | | |  |
| Time spent (hours): |  | | | | |  |

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| --- | --- | --- | --- | --- | --- | --- |
| Activity: |  | | | | | |
| Date: |  | | | | | |
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| Signature of manager/mentor: |  | | | | |  |
| Time spent (hours): |  | | | | |  |