

**Guide to Preparation of Details of Experience and
Continuing Professional Development
in the Area of Specialization**

**(THE CERTIFIED BIO DATA IS ONLY A SUPPORT DOCUMENT TO THIS
SUBMITTAL)**

Name: _____

Area of Specialization : _____

1. From the criterion selected on page 1, please provide detailed and specific information on the professional engagement in the area of specialization only, following the format below:

Date
From
To
Name of Employer
Position or Job Title
Job Description
Projects Undertaken

2. List CPD Programs with units earned in the area of specialization.

<u>CPD Activity Titles</u> <u>Earned</u>	<u>CPD Code</u>	<u>CPD Units</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. Submit Certified True Copy of the Documents to support the application for accreditation.

For Criteria

- 1, 4 or 5 - Certificate(s) of Employment
2 - Certificate(s) of Attendance in CPD Activities/Certificate of Employment
3 - School Diploma or Certificate and Certificate(s) of Employment