



CPD Record Card

Name & Surname					
ASDA Membership no.					
Professional designation	Technician		Practitioner		Master
Date of submission (year)			Period of CPD (year – year)		

	Brief description of activity	Duration	Category	CPD points claimed	Description of Evidence
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

*** insert additional rows as required.*



Summary of CPD points claimed

Cat. no.	Category	CPD points (Max)	Points claimed	Cat. no.	Category	CPD points (Max)	Points claimed
1	Learning Programme: Formally Assessed	30		6	Ground-breaking Professional Work-Based Activities	20	
2	Workshop, Seminar, Conference, etc: Not Formally Assessed	15		7	Self-Directed Learning: Not Formally Assessed	10	
3	Delivering Presentations or Papers	25		8	Professional Contribution to Individuals or Organisations	20	
4	Research	30		9	Formal Studies: Full Time	40	
5	Writing articles or publications	20		10	Formal Studies: Part Time	20	

Signature: _____

Date: _____