AKA PRACTITIONER CONTINUING PROFESSIONAL EDUCATION (CPE) RECORD ending 30th June 2019.

I hereby state that all information on this form is true and correct. This form must be signed and dated by the AKA member.

Date:_____Signed:_____ Print Name:_____

Date Activity	CPE Activity List Item No.	Brief Description of Activity	Points	**Proof:** You must be able to verify CPE activity with either verification signature OR proof of attendance eg receipt/certificate **if audited**.
July 2018 - June 2019	*18*	*AKA In Touch Magazine*	*5*	*Membership renewal*
		Total points accrued		

NOTE: Record form must contain a summary of all CPE being submitted for this year. Do not include supporting documents. You must be able to verify CPE activity with either verification signature OR proof of attendance eg receipt/certificate **if audited.**