Voluntary Continuing Professional Development Scheme for Licensed Plumbers

Application form for One-off Accredited Activity

Part I: Fact Sheet	
Name of Organisation:	
Address:	
Name of Person in-charge:	
Title or Position:	
Telephone Number:	Fax Number:
Email Address:	

Summary of the Programme to be provided		
Date:		
Time:		
Venue:		
Detail:		
(Training course materials such as presentation reseparately)	naterial will be provided	
List of documents to be submitted together with this	application form:	
 Training course materials 	application form.	
• Resume of the presenter(s)/ speaker(s)		
· Sample of CPD Certificate		
• Itinerary for site visit activity (if applicable)		
Signature of Person in-charge:	:	
Name of Person in-charge:		
Date:		

(Application should be submitted to: Secretary of the CPD Course Panel, 46/F Immigration Tower, 7 Gloucester Road, Wanchai, Hong Kong)