

Voluntary Continuing Professional Development Scheme for Licensed Plumbers
Personal CPD Record Sheet
 (Year _____)

Name of the Licensed Plumber: _____ (LPID: _____)

CPD Code	End Date of Accredited Programme/ Activity	CPD Credits	Title of Accredited CPD Programme/ Accredited Activity	Programme Organiser(s)

Remarks:

1. I *agree / do not agree* **(delete as appropriate)* WSD to publish my CPD credits achieved in the year above.
2. Licensed Plumber is normally required to submit this form to WSD for process from 1st October to 31st January of the next year if he/she wishes to obtain the certificate of recognition or publish on WSD website. The form shall include CPD details of the whole year.
3. Please submit this form with a copy of relevant supporting documents for verification

Signature of Licensed Plumber: _____