

**Voluntary Continuing Professional Development Scheme
for Licensed Plumbers**

**Application form for Appointment
as Accredited CPD Programme Provider**

Part I: Fact Sheet

Name of Organisation:

Address:

Name of Person in-charge:

Title or Position:

Qualification(s):

Telephone Number:

Fax Number:

Email Address:

Administration of CPD & Organisation Structure

(Organization chart and procedure showing the organization meets the accreditation requirements; roles of staff involved in developing, managing and reviewing of the CPD programme should be clearly defined)

Declaration of Understanding

I have read through the various parts of the manual namely “Manual for Accredited Provider of Voluntary Continuing Professional Development for Licensed Plumbers” published by Water Supplies Department and understood the requirements of an Accredited Provider.

List of documents to be submitted together with this application form:

- Resume of the person-in-charge and CPD programme planner/chairperson

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)

Part II: Report Summary Sheet on Training Programme or CPD Activities

Name of the Organisation:	
Reporting Period:	

Please provide the Training Programme or CPD Programme/Activities using the below table. CPD Course Panel/Water Supplies Department may request the applicant to provide document to substantiate the information.

Date	Duration [Hours]	Title of Accredited CPD Programme/ Accredited Activity	Speaker(s) [Name(s) & Professional Qualifications]	Number of Participants