**CPD Activity Evaluation Sheet**

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| **Candidate:** |  | **Supervisor:** |  |

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| **Submission Stage:** |  | **Date:** |  |

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| **Title of CPD Activity (including duration)** |  |
| **Highlight the Key Issues Raised** |  |
| **Highlight the Key Learning Points and Implications for your Own Practice** |  |
| **Actions Moving Forwards** |  |
| **Supervisor’s Comments** |  |
| **Additional Follow-up Required by the Candidate?** |  |