**DTAA: CPD Reporting Form**

|  |  |  |  |
| --- | --- | --- | --- |
| **Name of member** |  | **Reporting period** | 1/1/2019 -  31/12//2019 |

**Annual CPD requirement – 20 hours**

**Category A:** Minimum annual requirement – 15 hours.

The total annual requirement of 20 CPD hours may be accrued from Category A only.

**Category B:** Maximum claimable annual allowance - 5 hours

**Please complete Sections 1 and 2 of this form*.***

**Section 1: Summary**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Activity code** | **Total CPD Category A** | **Section 2**  **Form to complete** | **Documentation needed** | **Number of hours for year** |
| **A1** | Imparting knowledge relating to DMT through formal presentations, teaching, research and peer-reviewed publications | Form A | Please attach promotional material |  |
| **A2** | Attendance at person-to-person courses, workshops, seminars and conferences | Form A | Please attach certificate of attendance |  |
| **A3** | Contributing to DTAA activities – executive, committees, writing for Moving On | Form B | Please attach pro-forma C signed by convener |  |
| **A4** | Participation in online facilitated learning | Form C | Please attach certificate or flyer |  |
| **Total CPD Category A** | |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Activity code** | **Total CPD Category B** | **Section 2 Form to complete** | **Number of hours for the year** |
| **B1** | Personal dance practice: participation in dance movement activities that reinforce therapeutic skills | Form C |  |
| **B2** | Participation in peer learning groups  (logged on journal/ group reporting form). | Form C |  |
| **B3** | Participation in online non-facilitated learning  (logged on journal/ group reporting form). | Form C |  |
| **B4** | Reading dance movement therapy articles and books (logged on journal/ group reporting form). | Form C |  |
| **Total CPD Category B** | |  |  |

|  |  |
| --- | --- |
| **Total annual CPD Category A (must be 15 or more)** |  |
| **Total annual CPD Category B (no more than 5)** |  |
| **Total annual CPD (A + B must total 20 or more)** |  |

**For each activity claimed above, please complete the appropriate template. Copy any template as many times as needed**

**Section 2: CPD Activity Reporting Templates**

**Form A: Activity Report – to be used for CPD Activity Categories A1 and A2**

|  |  |
| --- | --- |
| **Activity code (A1 or A2)** |  |
| **Activity description** |  |
| **Topic** |  |
| **Facilitator/Convener** |  |
| **Relevance to your current**  **professional work** |  |
| **Host organisation or**  **event provider** |  |
| **Date(s)** |  |
| **Location** |  |
| **Number of hours** |  |
| **Documentation attached:**  **Certificate of attendance or other** |  |

**Form B: Report for Contribution to DTAA Activities – to be used for Activity Categories A3**

|  |  |
| --- | --- |
| **DTAA Committee name or Other activity** |  |
| **Convener of DTAA Activity** |  |
| **Description of your personal contribution to this activity and its relevance to DTAA** |  |
| **Number of Hours (as agreed upon by Convener** |  |

**Form C: Journal/Group Report –used for Categories A4, B1, B2, B3, and B4**

|  |  |
| --- | --- |
| **Activity Code (A4, B1, B2, B3, or B4)** |  |
| **Article reference**  **Or name of Group** |  |
| **Hours claimed** |  |
| **Number of people in group** |  |
| **Reflection on content of article or group learning and its relationship to your practice (suggested word length 300 words):** | |