**DTAA CONTINUING PROFESSIONAL DEVELOPMENT (CPD)**

**REPORTING FORM 2024**

DTAA Practising Members are required to complete at least 20 hours of CPD each membership year to maintain their

registration. Please complete the Form below, add up the total Hours for Category A and Category B, and enter them in the space at

the end of the chart. Then save this document with the following File Name: your **Full Name** **CPD2024.**

For more information, go to [**https://dtaa.org.au/dtaas-membership-levels/professional-development/**](https://dtaa.org.au/dtaas-membership-levels/professional-development/)

**Submitting your completed forms: Once you have paid your June 2024 membership renewal fee,** you will receive a message with a **LINK.** Click on the link and you can upload your reporting forms. When your CPD Reporting Form 2024, your Supervision Reporting Form 2024 and Current Insurance Policy (Public Liability & Professional Indemnity) are received, your renewal will be complete and you can download your DTAA Certificate of Membership.

**THE CATEGORIES EXPLAINED**

**Category A Activities include:**

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| 1. Attendance at in-person and experiential courses, workshops, seminars and conferences
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| 1. Participation in live, online facilitated/experiential learning
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| 1. Imparting knowledge relating to DMT through formal presentations, teaching, research and peer-reviewed publications (max. 5 hours)
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| 1. Contributing to DTAA activities – executive, committees, writing for Moving On (max. 5 hours)
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**15 or more hours of Category A Activities are required.**

**Category B Activities include:**

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| Attending online non-facilitated learning/webinars |
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| Participation in peer learning groups, e.g. DTAA Branch meetings |
| Reading dance movement therapy articles and books – please write a 400-word summary for each submission: citing Title, Author, Publishing Date and Pages Read (if from a book or journal) = 1 CPD hour per Reading |

**No more than 5 hours of Category B Activities will be accepted.**

**CPD REPORTING FORM 2024**

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| --- | --- |
| **Practitioner’s Name:** |  |
| **DTAA Membership Level:** | [ ]  Associate [ ]  Provisional Professional [ ]  Professional [ ]  Clinical Supervisor |
| **Reporting Period:** | **Start Date:** | 1 July 2023 | **End Date:** | 30 June 2024 |

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| --- | --- | --- | --- | --- |
| **Date of Activity** | **Title of Activity** | **Who Ran Activity** | **No. of Hours Cat A** | **No. of Hours Cat B** |
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|  | **TOTAL CATEGORY A HOURS** |  |  |
|  | **TOTAL CATEGORY B HOURS** |  |