

Name

Ph/Mob

Address

Registered states

Registration N° AIA member N°

Continuing Professional Development Record

Completion of this form satisfies the record keeping requirement of the relevant jurisdiction. This form will be the basis for periodical audits and must be retained for five years.

Date	Activity	Provider name	Location (state)	Design	Documentation	Project Management	Practice Management	Formal points	Informal points
29.08.09	Sustainability in the tropics	Knowledge Services	VIC	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		2.0	
17.3.15	Risk Management	TAS Chapter	LAU	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1.5	
19.3.15	M3 Architecture - Laminex Speaker Series	TAS Chapter + UTAS	LAU	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		1.5
20.3.15	M3 Architecture - Laminex Speaker Series	TAS Chapter + UTAS	HOB	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		1.5
8.5.15	Human Centric Lighting	TAS Chapter	HOB	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1.5	
15.5.15	Human Centric Lighting	TAS Chapter	LAU	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1.5	
21.5.15	Make Architecture - Laminex Speaker Series	TAS Chapter + UTAS	LAU	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		1.5
22.5.15	Make Architecture - Laminex Speaker Series	TAS Chapter+ UTAS	HOB	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		1.5
10.6.15	NSS3: BIM under construction	Knowledge Services	HOB	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2.0	
15.7.15	Risk Management	TAS Chapter	HOB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	1.5	
31.7.15	W H & S essentials	TAS Chapter	HOB	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	1.5	
27.8.15	Gold Medallist - Peter Stutchbury	TAS Chapter	HOB	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>		1.5
								TOTAL:	

I hereby declare that the above information is both true and correct.

Signature

Date

