

## Self-Study Professional Development Documentation

Name:	Date of Activity or Meeting:
Email:	Phone:
Type of Activity:	
Source of Activity:	
Number of Professional Development Hours Earned*:	
Agenda Attached (Check One):	
Short Summary of Activity or Meeting & How You Will Use the Knowledge Gained: (Minimum of One Paragraph)	

\*Please Note: Self-study, meetings and volunteer activities may add up to no more than 1/3 of the total required professional development hours in a 12-month period. These activities must be documented and available for review by a licensing coordinator during program visits. This form has been created for documentation purposes at the discretion of the user and is attended as a template. This document should be completed upon completion of activity attended.



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