

CONTINUING EDUCATION RECORD FORM FOR YEAR: _____

NAME: _____

License# _____

CATEGORY	ACTIVITY	HOURS
Educational events (Congress, courses, inservices, workshops etc.)	1	
	2	
	3	
Credit courses (College or University courses, certification courses post. grad educ.)	1	
	2	
	3	
Presentations) (Provision of workshops, training or presentations of PT related topics)	1	
	2	
	3	
Mentoring (max 60 hr) (Providing supervision to a student or, mentoring a peer or receiving mentoring)	1	
	2	
	3	
Research (participation in research, or presenting research)	1	
	2	
	3	
Self Directed Study (group study, readings of PT related journals, books, articles etc)*	1	
	2	
	3	
Peer discussions (case consultation, condition discussions, ethical queries etc.)	1	
	2	
	3	
OTHER HOURS (Counted with Practice Hours)		TOTAL CE HOURS _____
Volunteering (Physiotherapy related)	1	
	2	
	3	
Professional Activities (College or Association committees and activities)	1	
	2	
	3	

(*Remember to record the name and date of the journal and the title of the article).

TOTAL OTHER HOURS _____