## **Continuing Professional Education Declaration**



Please fill in all sections of this form using CAPITAL letters and in blue or black ink.

1	(Applicant)		
of	(If your address has changed you must email support@collaw.edu.au)		
College Student No:			
declare that I have completed 10 units of Continuing Professional Education seminars (as listed below):			
My 10 hours/units of Professional Education were completed through:			
10 units of online courses provided to me as part of the PLT Program (either General Series / Business Skills / Combination), OR			
a combination of College online courses and courses from other CLE providers, OR			
face-to-face, seminars or conferences provided by the College or other CLE providers at my own / employers' expense			
Please provide details of the training seminars completed in the table below:			
Course	Provider	Attendance	Hours
		Face-to-face	Online
I declare that the statements contained in this declaration are true and not misleading in any respect. I acknowledge that there are serious professional consequences for false or misleading statements and that the College of Law relies on this declaration when certifying my completion of the PLT Program.			
	D	Date (DD/MM/YYYY)	
Signature of Applicant			
Signed in the presence of:	(Signature of Witness)		
Name of Witness:			
Address:			
Occupation:			

Please return to: Student Services, The College of Law, PO Box 2, St Leonards, NSW 1590 DX3316 St Leonards, NSW or email to support@collaw.edu.au.