

Continuing Professional Education Declaration



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

I _____ (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
		Face-to-face	Online
		Face-to-face	Online
		Face-to-face	Online
		Face-to-face	Online
		Face-to-face	Online
		Face-to-face	Online
		Face-to-face	Online
		Face-to-face	Online
		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.

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 via email to support@collaw.edu.au.