



CPD Pre-Approval Application

First Name:

Last Name:

Company Name:

Email:

Phone Number:

Business Address

Street:

City:

Province:

Postal Code:

Below, list the following: Event name with a description, the HR Competency covered in this event ([click here](#) for a list), number of instructional hours overall (excluding registration, non-networking breaks, etc.), and the learning outcome for the event. There is also a space called "notes" for any additional information that you feel is important. Please copy this page if additional room is required Please copy this page if additional room is required or you can put multiple events and descriptions within each space provided.

Self-paced / self-directed / distance education programs are eligible for credits equivalent to the minimum number of hours required to complete the event work.

Event Name and Brief Description:

HR Competency Covered in Event:



Hours of Instruction (total):

Learning Outcomes:

Other Notes: