

## REFLECTIVE CPD ACTIVITY FORM



THE SOCIETY FOR  
VASCULAR TECHNOLOGY OF  
GREAT BRITAIN AND IRELAND

**Name:** ASIF DILSHAD

**Job Role:** VASCULAR SCIENTIST

Description: <i>(i.e. SVT AGM 2017, presented at local meeting)</i>	SVT EDUCATIONAL COMMITTEE
Date(s):	16/1/19 (to 17/1/19) Total Days/Hours 1 DAY
Type of activity:	<input checked="" type="checkbox"/> Educational <input type="checkbox"/> Professional <input type="checkbox"/> Work-based <input type="checkbox"/> Self Directed <input type="checkbox"/> Other _____
Benefits to your practice:	BUILD ON CURRENT LEARNING AND PRACTICE IN AREAS TO DEVELOP AND IMPROVE
Benefits to service user:	MORE COMPREHENSIVE PRACTICE WITHIN WORK.
Supporting evidence: <i>(can include program certificate, notes, presentation, signed training sheet)</i>	MINUTES TO MEETING
Additional notes:	

**Please complete reflection form for each activity submitted**