

Date Received	
Course Code	
CPD points	

**BSHAA
APPLICATION FOR CPD COURSE ACCREDITATION**

Contact Name	
Course Provider	
Address of Course Provider	
E-Mail address	
Telephone number	
Course Title	
Dates of Course	
Teaching Hours	
Aims and objectives	
Is a Test included	Yes/No
• Attach the following	
Full timetable	Yes/No
Course Content eg slides/handouts	
Copy of Test, marking scheme & pass mark (if applicable)	
Date of submission	

NOTES:

1. Course Providers must submit this form (and all attachments) electronically to cpd@bshaa.com
2. The Course Provider will be advised of a course code on receipt of the application form.
3. The Course Code must be included on all correspondence and, if possible, certificates of attendance.

If there are any queries please contact
 BSHAA, 9 Lukins Drive, Great Dunmow, Essex CM6 1XQ
cpd@bshaa.com
 01371 876623