**Continuing Professional Development Record for Tax Agents**

|  |
| --- |
| 1. **Tax Agent Details**
 |
| Tax Agent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Tax Agent Identification Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| CPD Period: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Listed as: |  🞎 Indirect Tax | 🞎 Direct Tax |

|  |
| --- |
| 1. **Details of Structured CPD Programmes**
 |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Name of Provider** | **Location of Provider** | **Name & Description of Activity** | **Outcome of Learning** | **Number of Hours** | **Evidence** |
| **Start Date** | **End Date** | **Indirect Tax** | **Direct Tax** |
|  |  |  |  |  |  |  |  | 🡩 |
|  |  |  |  |  |  |  |  | 🡩 |
|  |  |  |  |  |  |  |  | 🡩 |
|  |  |  |  |  |  |  |  | 🡩 |
| Add more rows Badge Follow with solid fill |
| **Total** |  |  |  |

|  |
| --- |
| 1. **Details of Unstructured CPD Programmes**
 |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Date** | **Name of Provider** | **Location of Provider** | **Name & Description of Activity** | **Outcome of Learning** | **Number of Hours** | **Evidence****(Optional)** |
| **Start Date** | **End Date** | **Indirect Tax** | **Direct Tax** |
|  |  |  |  |  |  |  |  | 🡩 |
|  |  |  |  |  |  |  |  | 🡩 |
|  |  |  |  |  |  |  |  | 🡩 |
|  |  |  |  |  |  |  |  | 🡩 |
| Add more rows Badge Follow with solid fill |

1. **Declaration**

🞎 All information provided above is true and valid and all criteria to obtain CPD has been met.

**Signature and Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**