



## CPD Logbook

ERB/CPD/F3.0

CPD Portfolio for the Annual Cycle ending **31<sup>st</sup> December 2020**

**This is an editable PDF. Please complete and return to:**

**Postal Address:**

P. O. Box 1909  
AAD Poso House  
Gaborone  
Botswana

**Physical Address:**

Building 4, Setlhoa Office Park  
Block 10, Gaborone  
Tel: +267 391 4446/ 398 4900  
Fax: +267 397 3626

**Email:**

[renewals@erb.org.bw](mailto:renewals@erb.org.bw)

Surname:		Practising certificate No.:	
Name(s):		Issue date:	
ERB Registration No.:		Expiry date	

**CATEGORY 1: DEVELOPMENTAL ACTIVITIES:** 10hrs/Credit (Max. 2 Credits per year from this category)

Activity  Activity could be: Congress/Refresher course/Workshop/Lecture/ Seminar/Conference/Colloquium  (e.g. Conference – 2018 International Engineering Week)	Date  (yyyy/mm)	Provider  <i>(If provider is not a recognized voluntary association or accredited institution, provide name of recognized voluntary association approving the activity as well)</i>	Duration			Credits Claimed	Verification  <i>(Provide proof of attainment or participation e.g. Certificate or letter)</i>
			From (dd/mm)	To (dd/mm)	Total hrs.		
<b>Total Credits for this Activity</b>							

**CATEGORY 2: WORK-BASED ACTIVITIES:** (Max. 3 Credits per year from this category)

<b>Activity</b> Activity could be: Work-based activity/Mentorship of Graduate or Registered Engineer  (e.g. Work-based activity – Design of HVAC system for Client X)	<b>Date</b> (yyyy/mm)	<b>Provider</b> (i.e. name of Employer)	<b>Duration</b>			<b>Credits Claimed</b>	<b>Verification</b> (Provide proof of attainment or participation e.g. Certificate or letter)
			From (dd/mm)	To (dd/mm)	Total hrs.		
<b>Total Credits for this Activity</b>							

**CATEGORY 3: Professional Services:** (No max. credits for this category. However, max. credits per activity must be observed)

<b>Activity</b> Activity could be: Membership of professional institution/BIE Council membership/ERB Board membership/Participation in engineering advancement meetings/Part-time lecturing/Self-study, etc. Refer to pages 12 – 14 of CPD policy for extensive list of activities  (e.g. Membership – BIE)	<b>Date</b> (yyyy/mm)	<b>Provider</b> (i.e. name of Institution)	<b>Duration</b>			<b>Credits Claimed</b>	<b>Verification</b> (Provide proof of attainment or participation e.g. Certificate or letter)
			From (dd/mm)	To (dd/mm)	Total hrs.		
<b>Total Credits for this Activity</b>							