[Hong Kong College of Surgical Nursing]

Members and Fellows' Continuing Nursing Education Record Form

(for CNE Period: 1 April 2022 to 31 March 2025)

Full Name: _____

Ordinary Member Certificate / Fellow Diploma No.: _____

Date of Admission of Membership / Fellowship : _____ (date) _____ (month) _____(Year)

Commencement of 1st cycle is on the 1st day of the month immediately after admission

Generic CNE Points: _____ **Point(s)**

Specialty Related CNE Points: _____ **Point(s)**

Total CNE Points: _____ **Point(s)**

(required CNE points for the 1st cycle is counted on pro-rata basis)

No.	Nature of CNE Activities	Programme Title of the CNE Activities	Date of Attendance		Generic CNE points	Specialty Related CNE points	Organizing Institute
			From	To			
e.g.	*Conference, seminar, talk, workshop*	*Development of the Advanced Practice Nurse (APN): Singapore (NUH) experience*	*6 May 2017*	*6 May 2017*	*3*		*HKAN*
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							

No.	Nature of CNE Activities	Programme Title of the CNE Activities	Date of Attendance		Generic CNE points	Specialty Related CNE points	Organizing Institute
			From	To			
9.							

10.							
11.							
12.							
13.							
14.							
15.							
16.							

Submitted by: _____

Signature: _____

Endorsed by: _____

Signature: _____

Position: _____

College: _____

Date: _____