IBP Superior Qualification

Associateship of IBP (AIBP)

Continuing Professional Development (CPD)
Record of Training received or imparted

Full Name	

Access Number	

Old Enrolment Number (if any)	

S.NO	DATE (S)	COURSE TITLE	INSTITUTION	CPD HOURS*

* A minimum of 60 hours CPD is required through receiving or imparting training or other knowledge related activity.

Signature of Applicant

Signature of an Officer Senior to the Candidate
With designation & bank stamp.