ASTTBC TECHNOLOGY PROFESSIONALS

CPD Extension Request Form

Salutation		First Name		Last Name	
Address					
City		Postal Code		Province	
Tel/Mobile			Email		
Registrant No			Discipline		

Description of the extenuating circumstances

Please note that ASTTBC's CPD requirements may be completed over a period of one year, running June 1 to May 31. The requirements can be found here https://asttbc.org/registrants/continuing-professional-development/.

Evidence that can be provided in support of the request

*Evidence should be **verifiable by a third party** (for example, provided by a healthcare professional, an employer, or the Canada Revenue Agency) and **relevant** (linked directly to the circumstances impacting the registrant or applicant's ability to complete and record CPD requirements)*

To the best of my knowledge, the above information is complete and accurate	*(please check)* ☐
Registrant Name	
Registrant Signature	
Date	