**CPE SUBMISSION FORM**

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|  | **CPE RECORD** | | | **FOR THE YEAR:** | | | **2020-2021** | | |
| Name : | Click or tap here to enter text. | | | | | | | | | |
| Registration No : | Click or tap here to enter text. | | | | Practicing Certificate No. : | | | Click or tap here to enter text. | | |
| Date of Birth: | Click or tap here to enter text. | | | | Age: | | | Click or tap here to enter text. | | |
| Select Category: | |  | | | |  | | |  | |
| ☐ Architects | | ☐ Professional Engineer | | | | ☐ Quantity Surveyor | | | ☐ Building Draughtsman | |
|  | | Branch: | Choose an item. | | |  | | |  | |

| **Name of Event Attended** | **Venue and/or Organiser** | **Date** | **CPE Credit Point(s) and**  **Qualifying Category of Event** | **Document Attached** |
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