Hong Kong College of Midwives

Members and Fellows' Continuing Nursing Education (CNE) & Continuing Education in Midwifery (CEM) Record Form (for CNE/CEM Cycle: 1 April _____to 31 March _____)

Full Name:
Ordinary Member Certificate / Fellow Diploma No.:

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

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

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

Total Points: _____ **Point(s)**
(required CNE/CEM 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		CNE points	CEM points	Organizing Institute
			From	To			
e.g.	*Conference, seminar, talk, workshop*	*Development of the Advanced Practice Nurse (APN): Singapore (NUH) experience*	*6 May 2016*	*6 May 2016*	*3*		*HKAN*

No.	Nature of CNE Activities	Programme Title of the CNE Activities	Date of Attendance		CNE points	CEM points	Organizing Institute
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