2	Continuous Educational Categories	Points Awarded
1.	Reflective Journal/Case Study	5
2.	Presenting a project	5
3.	day Seminar/lecture	10
4.	½ day Seminar/lecture	5
5.	Annual Congress	10
6.	Achieving an extra qualification:	Certificate: 10 Diploma: 15 Degree: 30
7.	Presenting a lecture or workshop	10
8.	Attending a 1-2 hr lecture or workshop	5
9.	Review of journal article or research proposal	10
10.	Participation in examinations/evaluations/assessments	10
11.	Direct mentoring or supervision of students	1 per day
12.	Instructors successfully completing a course	1 per course

Date	Category	Торіс	Stamped/Signed by
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CPD/CME TRACKING — Page 5

Your request has been completed successfully.

Transaction with reference number 296150299656105 is in Accepted state.

Payments to Other Bank Accounts - Confirm

13-03-2023 11:30:02 GMT +0000

My Statement Description: MAWIRE T FEES

Source Account: 11991235037 302 600177116

Beneficiary Details

Beneficiary Name: ALLIED HEALTH PRACTITIONERS COUNCIL

Beneficiary Account: 66161383840018

Beneficiary Email: Mobile No.:

Payment Details

Country: Zimbabwe

Transfer Currency: Zimbabwean Dollar

Transfer Type: Low value Transfer amount: 180,000.00

IMT Tax Waiver: No

Pay Now: 14-03-2023

Beneficiary Bank Details

Beneficiary Bank Code: 06100

Bank Name: CBZ BANK
Bank Address: HEAD OFFICE

City: HEAD OFFICE

Other Details

Beneficiary Statement MAWIRE T FEES

Description: Template Access Type:

OK

Add as Beneficiary