

Continuing Competency Program - Record of Learning Activities

Name:	CLPNNL Licensure Number:
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LPNs are required to complete 14 hours of learning activities, 7 of which must be formal learning.

All activities *must* occur between April 1st & March 31st of the licensure year.

Date of Activity	Time	List Activity	New learning/knowledge obtained
		For example, in-service, workshop, committee participation, course work, preceptorship.	Identify what you learned from participating in this event and indicate how it will contribute to your nursing practice.

If you are selected to participate in the audit process, sign below to verify the accuracy of your participation in the activities listed above.

Signature: _____ Date: _____