

**Expression of Interest**

Thank you for your interest in the University of Salford's QCPD: our quality assurance mark for continuing professional development activities.

Please note that the QCPD provides quality assurance but DOES NOT convey any academic credits.

Please complete the BLUE BOXES in the form below.

Boxes will expand as you type if necessary.

Once completed, please return the form to us via email at - qcpd@salford.ac.uk

Once we have received your form, we will get in touch to discuss further.

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| **About the CPD** |
| 1. **What is the title of your CPD?**
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| 1. **What topics does your CPD cover?**
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| 1. **What industry does your CPD relate to?**
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| 1. **How many times has this CPD been delivered?**
 |
| **Choose an item.** |
| 1. **How long is your CPD?**

i.e., how many sessions over what duration (e.g., 1 day per month for 6 months; or 2 consecutive days; or 3 days per week for 12 weeks; or 3 days spread over 6weeks) |
|  |
| 1. **Please select which types of CPD activity you are providing:**

Click the boxes to select |
| [ ]  **TRAINING**: Learning how and what to do but not necessarily why. Can be simple skills or complex, with many components and steps. Can instil automatic responses in high pressure situations (e.g., fighter pilots).[ ]  **EDUCATION**: Learning about ‘why’ by exploring underpinning theory for what we do and how we do it. Instils the ability to consider alternatives, analyse them, and make reasoned decisions about practice.[ ]  **DEVELOPMENT**: Application and experience, perhaps developing flexibility and deeper insight. Purposeful planning of activities to prepare for higher levels of practice or responsibility. Can be early in a vocational journey (e.g., shadowing and work experience prior to training) or later when focusing on personal development (e.g., when highly skilled and plateauing in terms of education and training)[ ]  **OTHER** *(Please add detail here)* |
| 1. **Is this the only CPD activity you plan to submit for QCPD accreditation?**
 |
| **Choose an item.** |
| 1. **Please provide details of any potential actual or potential conflict of interest:***A conflict of interest exists where the CPD and/or its delivery may be influenced or biased by a relationship with a third party such as a commercial organisation or an undeclared benefit that may accrue to the provider due to such a relationship, whether formal or informal in status.**The CPD activity must be clearly focused on learning, for the development of the delegates/learners. Any marketing of products or services must be ancillary to the learning event/activity.**If there are NO potential conflicts of interest please just say 'NONE'*
 |
|  |
| 1. **Please identify what duration of accreditation you are seeking** (you can change your mind later if necessary)
 |
|   Choose an item. |
| **ABOUT YOU** |
| 1. **Name:**
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|  |
| 1. **Job Title:**
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|  |
| 1. **What is your role in relation to the CPD?**
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|  |
| 1. **Organisation:**
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| 1. **Telephone number you are happy to be contacted on:**
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|  |
| 1. **Email address:**
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|  |
| 1. **Postal address:**
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|  |
| 1. **Website URL:**
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| **DECLARATIONS**Please select the tick box responses below: confirming (or not) the following statements: |
| 1. **I declare that I am covered by Professional Indemnity and Public Liability insurance either personally or by my employer’s policies.**
 |
|  [ ]  Confirm [ ]  Cannot confirm |
| 1. **I declare that I have not been subject to any complaint being made against me from any professional membership body that relates to my practice, or other adjunct, that could bring my fitness to practice and/or safety of members of the public into question**
 |
|  [ ]  Confirm [ ]  Cannot confirm |
| 1. **I declare that I have not been subject to any complaint or prosecution in relation to equality and diversity**
 |
|  [ ]  Confirm [ ]  Cannot confirm |
| 1. **I declare that I have not been subject to any complaint or prosecution in relation to modern slavery**
 |
|  [ ]  Confirm [ ]  Cannot confirm |
| 1. **I declare that I have not been the subject of any civil claim brought against me, other disciplinary action, investigation, proceeding or enquiry**
 |
|  [ ]  Confirm [ ]  Cannot confirm |
| 1. **If you were unable to confirm any of the above declarations, please provide an explanation below.**
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|  |
| **FINALLY** |
| 1. **It would be really helpful if you could tell us how you heard about the University of Salford's QCPD**
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|  |
| 1. **Please add any further comments or questions here:**
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|  |
| **Date of Completion:**Click or tap to enter a date. |

Thank you for your expression of interest in the QCPD.

Someone from our team will contact you soon to arrange a discussion and identify how we proceed.