



Page 1 of 4	Application for Approval of a Continuing Professional Development (CPD) Activity	 ECSA
Form No.: CPD-ECPD2		
Effective Date: 27 July 2021		
Rev No: 04		

Please complete and return to: SOUTH AFRICAN INSTITUTE OF MARINE ENGINEERS AND NAVAL ARCHITECTS ECSA CPD Licensed Body Number: LB_027/2023			
1. Provider applying for the validation of an activity in terms of the ECSA CPD Standard:			
Name of CPD Service Provider:*			
Unique Verification Number:*			<i>(Allocated by SAIMENA)</i>
Title:			
2. Person who is applying for validation on behalf of the CPD Service Provider:			
Surname and Initials:*			
Title (Prof/Dr/Mr /Ms):			
Position held:			
Phone number:			
Email address:			
Identification Number:*			
3. Details of the Activity:			
Duration of Activity	<i>(hours)</i>	Credits:	<i>(points)</i>
Location:*	Province		
Province:	City		
Website:*			
Mode of Delivery:*	Colloquiums		Lectures
	Conferences		Refresher Courses
	Congresses		Seminar
	E-learning		Workshop
	Large Group Workshops		
Target Participants: <i>(Discipline and Category of Registered Persons)</i>			
Category:	Professional Engineer		Professional Engineer Technologist
	Professional Engineer Technician		Specified Category
	Professional Certificated Engineer		

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Discipline:	Aeronautical		Mechanical	
	Agricultural		Metallurgical	
	Chemical		Mining	
	Civil		Industrial	
	Electrical		All	

Sub-Discipline:	Marine		
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Scope: *			
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Learning Outcomes: *	Engineering		Project Management	
	Technical		Legal	
	Office		Finance	
	Computer Skills		Interpersonal Skills	
	General Management		Quality	


4. Details of the Activity Presenter(s):

Surname and Initials:*	Title (Prof/Dr/Mr /Ms):	Phone number:	Email address:	Identification Number:*

Add extra rows as required.

REQUIREMENTS THAT NEED TO BE FULFILLED WHEN APPLYING FOR VERIFICATION: CHECKLIST

1) Comprehensively completed (ECPD2) application form.	Yes/No
2) Curriculum Vitae of the activity presenter(s) included.	Yes/No
3) Certified Copy of the presenter(s) identification document included.	Yes/No
4) Confirmation of availability of the presenter(s) for the period of the activity included.	Yes/No
5) Activity objectives and outcomes identified and indicated.	Yes/No
6) Quality of the activity identified and indicated.	Yes/No
7) Activity pricing and cost included.	Yes/No
8) Reimbursement policy in place and indicated.	Yes/No

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Title:		

Form (ECPD2) must be submitted together with the supporting documents identified in the above checklist.

Evaluation forms for obtaining feedback from participants for rating of the relevance, quality and effectiveness of the activity, must be attached to this application.

I, in my capacity as
 and authorised representative of the
 (name of the body)


hereby apply, on behalf of the identified CPD Service Provider for validation of the above mentioned activity in terms of the Rules: Continuing Professional Development and Renewal of Registration (Board notice 86 of 2017) and Section 11 of the Standard for Continuing Professional Development (ECPD-01-STA).

I enclose the required information/documentation in substantiation of the application and confirm that the information/documentation, to the best of my knowledge, is accurate and complete.

Signed on the _____ day of _____ (month & year).

 Signature

Physical Address:	<i>Line 1</i>
	<i>Line 2</i>
	<i>City</i>
	<i>Province</i>
	<i>Country</i>
Zip/Postal Code:	

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ECSA Requirements for validation of CPD Activities

(refer [ECPD-01-STA: Standard for Continuing Professional Development](#))

The validation of CPD Activities ensures that CPD Activities meet the minimum requirements for CPD credits which include the following:

- a. Full details of the CPD activity must be provided: title, duration, location, mode of delivery, scope, learning outcomes and type of the activity. An application form (eg existing ECPD2 Form) must be completed in full and submitted to the Licensed Body for processing.
- b. The engineering registration category and discipline for the target audience must be indicated (eg Professional Engineer: Mechanical). If there are multiple categories, all categories must be indicated.
- c. Details of the presenter must include the title, name and contact details. The presenter's expertise must be provided in the form of a CV to include experience and educational achievements. A certified copy of his/her ID is also required. Availability for the period of the activity must be confirmed by the presenter as a signed attachment. Should the presenter be changed due to unforeseen circumstances, the details of the new presenter must be submitted to ECSA for review together with the motivation for the change.
- d. The validated CPD Activity must indicate how the CPD Activity contributes to the ECSA professional competencies. The activity's objectives and outcomes must therefore be submitted.
- e. The CPD Service Provider must demonstrate how the quality of the CPD activity is ensured. The quality of the CPD activity includes the entire learning and development process for the activity (eg content, assessments, teaching and learning material, attendance and certification).
- f. Details of pricing activities and costs must be provided to the CPD Licensed Body.
- g. The participants must be made aware of the reimbursement procedures.