



SECTION 2: Continuing Educational Professional Development

Please complete in respect of each Provider / Instructor course on which you teach.

Name	
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Course Centre					
Course Dates					
Type of Course (circle one)	ARC ALS2/ALS	ARC ALS1/ILS	ARC ALS2 Instructor	RC(UK) ALS	RC(UK) ILS
	EMST	APLS	ATLS	ERC ALS	GIC
	Other:				

Instructor Activity / topic (e.g. Lecture, skill station, workshop)	Candidate Feedback Score *
Achieved outcomes and points for improvement	

Instructor Activity / topic (e.g. Lecture, skill station, workshop)	Candidate Feedback Score *
Key points of learning for you, achieved outcomes and any points for improvement	

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Key points of learning for you, achieved outcomes and any points for improvement	

*** Summaries of candidate feedback scores are available from the Course Centre, not from the Australian Resuscitation Council**