



Application for exemption from continuing professional development

Tills request can	only be made t	during the calendar year for which	uns ap	plication relates	
Requestor details - Th	nis request mu	ust be made by the licence or r	egistra	ation holder	
Name					
Address					
Email address					
Telephone number					
Licence or registration	n details				
Licence/registration number					
CPD year exemption is to be applied					
Current status for		Points already completed in exemption CPD year			
		Legal requirements			
exemption CPD year		Ethics or professional responsi	bility		
		Professional skills			
Exemption request de	tails				
Exemption type		Illness			
		Injury			
		Parental leave over two months (includes maternity leave)			
		Recognition of alternative learning			
		Other			
Total or partial		Partial exemption	To	otal exemption	
Legal requirements					
Number of points you are requesting an exemption for					
Ethics or professional re	esponsibility				
Professional skills					
Dates for exemption		From:			
		То:			

Full details of reason for applying for an exemption (Must include documentary evidence e.g. a doctor's certificate, letter from employer)					
Requestor's signature					
Date					

Your application and supporting evidence can be lodged:

In Person:

Department of Local Government, Industry Regulation and Safety Consumer Protection Division Gordon Stephenson House Level 2/140 William Street Perth WA 6000

Mail:

Department of Local Government, Industry Regulation and Safety Consumer Protection Division CPD Team Locked Bag 100 EAST PERTH WA 6892

Email:

cpd@lgirs.wa.gov.au