Record of Professional/Peer Supervision

Type* (PG) = Peer Group, (PS) = Professional (one on one) Supervision

Min 12 hours per year

Date	Type*	Hours	Print Name and Signature of Supervisor
	TOTAL HOURS		

Australian Hypnotherapists' Association

Free Advisory Line: 1800 067 557

Record of Ongoing
Professional Development and Professional/Peer Supervision

If you have the same supervisor or peer group all year
then one signature at the end of the year will be sufficient.

Year _____

Name _____

Address _____

Membership Level & Number _____

Contact Number/s _____

Email: _____

Supervisor _____

This Record is required to be submitted with your renewal

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Activities that Qualify for AHA Continuing Professional Education Hours

Activity	Hours	Evidence
All day seminar or workshop	7	Signed attendance form or copy of receipt
Half day seminar or workshop	3	Signed attendance form or copy of receipt
Professional peer group supervision	1	Signed attendance form or copy of receipt
Publication of an article in Hypnopatter or in a peer reviewed journal	1	Copy of article showing issue date and name of publication
Author or joint author of a published book	20	Book title, Publisher, year published and ISBN number.
Book and DVD report	5	Half page summary
Postgraduate study in hypnotherapy	20	Copy of Statement of Attainment
Presentation at a seminar, workshop or conference	5 hrs per presentation hr	Proof of Presentation (i.e. workshop flyer)
Professional development through technical books, short courses or CD-ROM	5	Copy of purchase docket, enrolment or loan of material from a library and a half page review (For Hypnopatter placement)
First Aid Certificate	7	Show date & Cert. No.
Courses longer than 20 hours in clinical practice or business management for clinic	10	Copy of receipt for course
Volunteer work in Hypnotherapy for a community based agency/project	Hr for hr	Written or signed evidence of participation from organisation
Subscription to a journal on Hypnotherapy	2 hrs per subscription	Proof of purchase and a copy of the table of contents
Attendance to Meetings	2	Proof of attendance

Record of Ongoing Professional Development

Min 20 hours per year

Date	Event	Hours	Verification
	TOTAL HOURS		