**Foundation Training Year: CPD Unplanned learning form**

|  |  |
| --- | --- |
|  **Trainee pharmacist:** |  |
|  **Designated supervisor:** |  |
|  **Date:** |  | **Stage of training (in weeks)** |  |
|  **Title of CPD:** |  |

|  |
| --- |
| Describe an unplanned event or activity that enabled you to learn something new or refresh your knowledge or skills |
| Give an example of how this learning benefitted the people using your service |
| Designated supervisor comments |