



ASAR

Australian Sonographer
Accreditation Registry

Form 2-4

Supervisor Validation Form

DO NOT SUBMIT THIS FORM TO ASAR UNLESS YOU ARE BEING AUDITED

THIS FORM IS FOR SUPERVISORS TO VALIDATE CPD ACTIVITIES

**COMPLETED VALIDATION FORMS ARE TO BE KEPT BY THE
INDIVIDUAL SONOGRAPHER**

**CPD activities must be entered directly into the individual sonographers
personal database by following the directions on the ASAR website.**

**Individuals experiencing difficulties when entering their CPD into their
personal database on the ASAR website should contact the
ASAR secretariat.**



Australian Sonographer Accreditation Registry Limited

PO Box 8323 Baulkham Hills BC NSW 2153

Telephone: (02) 8850 1144, Facsimile: (02) 8850 1177, Email: registry@asar.com.au, Website: www.asar.com.au



SUPERVISORS VALIDATION FORM

ASAR Number

Name

Address

Phone

Email

CPD Activity Code (01- 12)

Duration (Hours)

CPD Credits

Postcode

Supervisor's Name

Supervisor's signature

Details of the CPD Activity

CPD Activity Code (01- 12)

Duration (Hours)

CPD Credits

Postcode

Supervisor's Name

Supervisor's signature

Details of the CPD Activity



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Codes:

- 01: Attendance at national/international meetings
- 02: Attendance at educational programs including live scanning workshops
- 03: Attendance at grand rounds and relevant in-house seminars
- 04: ASAR approved website activities
- 05: Scientific or professional
- 06: Works presented at national or international meetings
- 07: Works presented at local meetings
- 08A: Works presented at in-house seminars including lectures, case studies and live scanning workshops
- 08B: Works presented at national, international or local live scanning workshops
- 09: Self directed learning to enhance patient outcomes and professional skills
- 10: Enrolment in an ASAR accredited program
- 11: Any other documented Professional or educational activity as approved by the Registry
- 12: Preceptorship

(Postcodes are for demographic purposes only)