

Registration #:		Registrant Name:	
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Learning Goal #1

Start Date:		Proposed Completion Date:	
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DETAILS

Practice Standard <i>Which standard of practice for your profession does your goal align with?</i>	
Learning Goal <i>What do you want to learn?</i>	
Rationale <i>Why do you want to meet this learning goal?</i>	
Objectives <i>What activities are you going to do to achieve this learning goal?</i>	
Patient Outcomes <i>How may this information help you improve your professional practice and patient outcomes?</i>	

REFLECTIVE EVALUATION

Complete this section after you have finished your learning activities. More info: [Reflective Practice](#)

New Knowledge <i>Identify something specific you learned by meeting this learning goal.</i>	
Reflective Evaluation of Learning Goal <i>Describe how you use this knowledge to improve your practice and positively impact client outcomes.</i>	



Registration #:		Registrant Name:	
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Learning Goal #2

Start Date:		Proposed Completion Date:	
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DETAILS

Practice Standard

Which [standard of practice](#) for your profession does your goal align with?

Learning Goal

What do you want to learn?

Rationale

Why do you want to meet this learning goal?

Objectives

What activities are you going to do to achieve this learning goal?

Patient Outcomes

How may this information help you improve your professional practice and patient outcomes?

REFLECTIVE EVALUATION

Complete this section after you have finished your learning activities. More info: [Reflective Practice](#)

New Knowledge

Identify something specific you learned by meeting this learning goal.

Reflective Evaluation of Learning Goal

Describe how you use this knowledge to improve your practice and positively impact client outcomes.