



The Hong Kong College of Psychiatrists
Certificate of Attendance for Overseas CME/CPD Activities
(For those activities with no formal attendance certificate)

To : Secretary
Education Committee
Hong Kong College of Psychiatrists
Room 906, Hong Kong Academy of Medicine Jockey Club Building
99 Wong Chuk Hang Road
Aberdeen, Hong Kong
Tel: (852) 28718777
Fax: (852) 28701391
Email: hkpsych@hkam.org.hk

This is to certify that I have attended the following CME/ CPD activities

Name of CME/ CPD Activities: _____

Date: _____ Time: _____

Venue: _____

Copy of the programme is enclosed.

Name of Fellow of Hong Kong College of Psychiatrists: _____

Signature: _____ Date: _____

Organizer of the Activity:

(official chop of organizer)

or

(Name and Signature of chairman/
responsible person of the activity)