Yo	u may enter you	ır Learning Plan on the	CDR website at www.cdrnet	t.org
Registration No:		Please print in capital lett	ers using a black pen.	<b>STEP 3</b> -
	Last:			LEARNING PLAN
	First Name:			Middle Initial:
	CDR Creder	ntial: (select only one) ORI	$\mathbf{D}$ or $\mathbf{O}\mathbf{D}\mathbf{T}\mathbf{R}$	
. 866	○ Th	nis is the FIRST Learning Plan fo	or this recertification cycle, OR	This is for my 5-year cycle starting:
Professional		is is a <b>REPLACEMENT</b> of a L		
Development		(You must submit a complete Learning Plan. The plan you submow will replace, not add to the Learning Plan you submitted earning Plan you submitted earning Plan you submitted earning Plan you.		Daytime Telephone:
Portfolio	ПО	w will replace, not add to the Lea	ining I fair you submitted carrier)	
				on the website, do not mail this form to C
				ortfolio Guide for specific requirements.
		ROFESSIONAL EDUCATION		- C-41
time. A summary of this inform			Certification	of these, even if you do not select them at the
○ 100 Academic Coursework	_	0 Lectures, Seminars	O335 CDR -CSG	Pre-approved Self-stud ○ 700 Audio-based
110 Case Presentations		0 Posters	O337 CDR -CSO	O 710 Computer-based
120 Certificate Program	O 190	0 Professional Leadership	○340 CDR -CSP	O 720 Printed
O 130 Exhibits		0 Professional Reading	O380 CDR -CSR	○ 730 Video-based
O 140 Experiential Skill Develop	_	5 Research	○385 CDR -CSSD	O 740 Web-based
○ 150 Interactive Workshops ○ 160 Journal Clubs		<ul><li>0 Residency &amp; Fellowship Progr</li><li>0 Sponsored Independent Learning</li></ul>		
O 100 Journal Clubs		0 Study Groups	(See Gr	uide for Code)
-In this step you develop a Learn	•	•		
<del>-</del>		•	<u>-</u>	eds Assessment Worksheet to finish this form
-It is recommended that you subm			•	
cycle, and no later than May 31 o			after the first CPE learning activity	recorded on your log in this recertification
-You must have a Learning Plan		•	vities.	Date of this Submission:
			e learning need on your Learning F	Plan.
1. Record your goal num	ber in the box p	rovided, and your goal on th	e line provided.	
2. Print learning needs the	nat will support	that goal on the lines provid ning Need Code in the boxes	ed.	Total # of Pages Submitted:
	, <sub>1</sub> ,	Enter this information onlin		
9930219711  Mail this original form to CDR at: 120 South Riverside Plaza, Suite 2000, Chicago, IL 60606.  Questions? Email CDR at redesign@eatright.org. or call CDR at 1-800-877-1600, ext. 5500.  Page:  Revised 10/24/07				

Make additional copies of this side if needed. Complete registration number and last name for each side completed. Provide Learning Need Codes supporting each goal in spaces below, using black pen. **Registration No: Last Name: STEP 3 - LEARNING PLAN** Goal #: Print Learning Need Print Learning Need Print Learning Need Print Learning Need Learning Need Code: Learning Need Code: Learning Need Code: Learning Need Code: Goal #: Print Learning Need Print Learning Need Print Learning Need Print Learning Need Learning Need Code: Learning Need Code: Learning Need Code: Learning Need Code: Goal #: Print Learning Need Print Learning Need Print Learning Need Print Learning Need Learning Need Code: Learning Need Code: Learning Need Code: Learning Need Code:

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