

## Reflective Practice Form

Use this form to reflect on your learning at the end of a CPD course or professional training with Masar University. Reflection helps you recognise your strengths, identify areas to develop and plan your next steps. Keep a copy for your own CPD record, and return a copy to [info@masaruni.ae](mailto:info@masaruni.ae) so that it can inform the review of the course.

*Related policy: Course Content Review Policy. An editable Word version of this form is on the policies page at [masaruni.ae](http://masaruni.ae).*

### 1. Learner details

|                                      |  |
|--------------------------------------|--|
| Full name                            |  |
| Email address                        |  |
| Course title                         |  |
| Date completed                       |  |
| CPD hours (if stated for the course) |  |

### 2. What did I learn?

*The key knowledge and skills you gained from the course.*

### 3. How will I apply it?

*How you will use what you learned in your work or practice, with an example if you can.*

### 4. What went well, and what did I find challenging?

*Your strengths during the course, and anything you found difficult and how you dealt with it.*

## 5. Did the course meet my learning needs?

*Compare what you hoped to gain at the start with what you achieved.*

## 6. My next steps

|                                      |  |
|--------------------------------------|--|
| Development action 1 and target date |  |
| Development action 2 and target date |  |
| Development action 3 and target date |  |

## 7. Declaration

I confirm that this is a true record of my learning and reflection on this course.

|              |  |
|--------------|--|
| Learner name |  |
| Signature    |  |
| Date         |  |

### For office use only

|                  |  |
|------------------|--|
| Date received    |  |
| Course reference |  |
| Reviewed by      |  |