

Ref. no.: _____

Continuous Profession Development
Reporting Form – Research Participation

1. Personal details:

Name:

HKIST Number:

Contact telephone number:

Email address:

2. Topic of research:

3. Role

Investigator

Participant – subject, rater or research assistant

4. Duration of participation: _____

Signature of member:

Remarks: please attach support document e.g. completed paper, proposal, information sheet etc. for our reference