



RPL

RECOGNITION OF PRIOR LEARNING

APPLICATION FORM

This Application Form will be used as a starting point to assess your suitability for RPL.

Once you have completed the form kindly post it to

Shafston Admissions Team

46 Thorn Street.

Kangaroo Point, 4169

Recognition of Prior Learning refers to the acknowledgment of skills, knowledge and competencies held as a result of formal training, work experience and/or life experience.

RPL Application Form

If the applicant is seeking recognition of prior learning (RPL), the following form must be completed and submitted to Shafston International College Admission Team. The completed documents can be emailed to vocational@shafston.edu or delivered in person or post to att: Shafston Admissions, 46 Thorn Street, Kangaroo Point QLD 4169.

Instructions: This form is composed of 4 parts. Part 1 is a cover sheet that the applicant completes once only. Part 2 and Part 3 is to be completed once only and requires the candidate to include Supplementary Documentation. This information can be referenced on Part 4. Part 4 must be completed for each unit of competency the applicant is applying for RPL.

For example: If the applicant is applying for RPL in 3 units of competency the applicant is required to complete Parts 1 & 2 & 3 once only. However, Part 4 must be completed for each unit of competency that the applicant is supplying evidence for – in this example Part 4 would be completed 3 times.

Please contact a member of the Shafston team if you have any queries with this process.

PART 1 – PERSONAL DETAILS

Student information: Please complete the information below:

| |
|--|
| First Name: |
| Surname: |
| Home Address: |
| Home Telephone: |
| Work Telephone: |
| Mobile: |
| Email (personal or work): |
| Date of Birth: |
| Gender: Male <input type="checkbox"/> Female <input type="checkbox"/> |
| Are you a permanent resident of Australia? Yes <input type="checkbox"/> No <input type="checkbox"/> |
| Qualification/Program Code for RPL purposes? (e.g. BSB40215) |
| Qualification/Program Name for RPL purposes? (e.g. Certificate IV in Business) |

I hereby certify that the information provided and the documentation attached is true and correct

Signature: _____

Date: _____

PART 2 - SELF EVALUATION

In this section you are asked to provide some general information about your current and past industry experiences, both paid and unpaid.

2.1 From the list below, place a cross (x) in the box of the industry you would like to receive RPL in.

| | |
|------------------------------------|--|
| Business | |
| Project Management | |
| Leadership and Management | |
| Early Childhood Education and Care | |

Have you had experience in this industry? Yes No

If you have further recent industry experience, please attach further evidence and/or your current resume.

For the industry area listed at Section 2.1 rate your own knowledge and skills against the list below.

| JOB ROLE | SELF ASSESSMENT | YES | NO | POSSIBLY |
|---|---|----------|----|----------|
| <i>Example: Job Role: Hospitality</i> | <i>I think my experience is of a high level</i> | <i>X</i> | | |
| | I think I am skilled to do this job | | | |
| | I know how to do the following tasks well (please list below) | | | |
| | I can explain my experience and provide documentary evidence | | | |
| | I have attended training courses for this area of work | | | |
| | I have undertaken much of this work without supervision | | | |



PART 3 - SUPPLEMENTARY DOCUMENTATION

Relevant employment and licenses

| Types of Employment and Licence Evidence | Supporting Document | No. | Brief Description of Relevant Evidence |
|---|---------------------|-----|--|
| <p>AS AN EMPLOYEE</p> <ul style="list-style-type: none"><input type="checkbox"/> Employer Reference/s<input type="checkbox"/> Brief CV or work history<input type="checkbox"/> Position descriptions<input type="checkbox"/> Proof of Professional Development undertaken<input type="checkbox"/> Examples of Reports or Work Documents<input type="checkbox"/> Other relevant evidence | | | |

| | | | |
|--|--|--|--|
| <p>AS A SELF EMPLOYED PERSON</p> <ul style="list-style-type: none"> <input type="checkbox"/> Statutory Declaration <input type="checkbox"/> Appliance Wholesaler/s and/or Retailer/s Letter of Support <input type="checkbox"/> Supplier/s Letter of Support <input type="checkbox"/> Position Description <input type="checkbox"/> Proof of Ownership of Business <input type="checkbox"/> Examples of Works carried out <input type="checkbox"/> Invoices for Works completed <input type="checkbox"/> Client Certified Letter of Support <input type="checkbox"/> Other relevant evidence | | | |
| <p>RELEVANT LICENCES (please list)</p> <ul style="list-style-type: none"> <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ | | | |

Relevant training/education and life experiences

| Types of Training/Education and Life Experience Evidence | Supporting Document | No. | Brief Description of Relevant Training |
|--|---------------------|-----|--|
| <p>TRAINING</p> <p><input type="checkbox"/> RTO courses (please list)</p> <ul style="list-style-type: none"> <input type="radio"/> _____ <input type="radio"/> _____ <input type="radio"/> _____ <input type="radio"/> _____ <p><input type="checkbox"/> Relevant Units of Competency's (please list)</p> <ul style="list-style-type: none"> <input type="radio"/> _____ <input type="radio"/> _____ <input type="radio"/> _____ <input type="radio"/> _____ <input type="radio"/> _____ <input type="radio"/> _____ <input type="radio"/> _____ <input type="radio"/> _____ <p><input type="checkbox"/> Relevant Units of Competency's (cont.)</p> <ul style="list-style-type: none"> <input type="radio"/> _____ <input type="radio"/> _____ <input type="radio"/> _____ <input type="radio"/> _____ <input type="radio"/> _____ | | | |

| | | | |
|--|--|--|--|
| <ul style="list-style-type: none"> ○ _____ ○ _____ ○ _____ ○ _____ ○ _____ ○ _____ <p><input type="checkbox"/> Short Training Programs</p> <ul style="list-style-type: none"> ○ _____ ○ _____ ○ _____ ○ _____ ○ _____ ○ _____ ○ _____ <p><input type="checkbox"/> Other Relevant Training</p> | | | |
|--|--|--|--|

OTHER RELEVANT EXPERIENCES

| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

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Office use only**Assessor information and recommendation**

Application must be registered with SHAFSTON Administration before processing

| Evidence | Evidence meets requirements (if "unsatisfactory", reason must be documented) | | |
|---|--|---------------|---------|
| | Satisfactory/ Unsatisfactory | Evidence Used | Comment |
| Element 1 | | | |
| Element 2 | | | |
| Element 3 | | | |
| Element 4 | | | |
| Element 5 | | | |
| Critical Aspects of knowledge & skills | | | |
| Essential Knowledge | | | |
| Essential Skills | | | |

RPL result:

Class no:

Assessor recommendation

Student feedback given: Yes No

Assessor name:

Assessor comments:

(Overall comments to Student must be documented)

Assessor Signature:

Date:

Student signature:

Date:

(After receiving assessor feedback)

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SHAFSTON admin contact name:

Phone:

Date received from student:

Date returned by assessor:

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