

# Recognition of Prior Learning (RPL) Request Form FRM-RPL01



This form is to be completed by students wishing to apply for Recognition of Prior Learning (RPL). RPL is an assessment process that evaluates your existing skills and knowledge — gained through formal, non-formal, or informal learning — against the requirements of a unit of competency.

Please read the RPL Student Information Sheet before completing this form. Submit your completed form with any available supporting evidence to [info@shafston.edu](mailto:info@shafston.edu). The Vocational Education team will assess your preliminary application within 5 business days of receipt.

Section A: Student's Personal Details			
Family Name:		DoB:	
Given Name:		Student ID No.:	
Email Address:		Mobile No.:	
Course Name:		Course code:	
Campus:	<input type="checkbox"/> Brisbane <input type="checkbox"/> Gold Coast <input type="checkbox"/> Sydney	Request Date:	

Section B: Preliminary Self-Assessment		
Please answer the following questions honestly. Your assessor will discuss these with you.		
Questions	Yes	No
Q1. Have you reviewed the unit requirements on training.gov.au for each unit listed above?	<input type="checkbox"/>	<input type="checkbox"/>
Q2. Do you believe you have relevant work experience, training, or life experience that meets the requirements of the unit(s)?	<input type="checkbox"/>	<input type="checkbox"/>
Q3. Can you provide documentary evidence to support your experience (e.g. work records, qualifications, third-party reports)?	<input type="checkbox"/>	<input type="checkbox"/>
Q4. Have you previously completed the same or a superseded version of any of these units at another institution?	<input type="checkbox"/>	<input type="checkbox"/>
Q5. Do any of your qualifications or work experience originate from overseas?	<input type="checkbox"/>	<input type="checkbox"/>
Q6. Are you aware that RPL is a thorough assessment process and that a successful outcome is not guaranteed?	<input type="checkbox"/>	<input type="checkbox"/>

Section C: Evidence Summary		
Briefly describe the evidence you intend to provide. Your assessor will guide you through detailed evidence mapping after this application is assessed.		
Type of Evidence	Brief Description	Unit(s) It Relates To

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## Section C: Evidence Summary

Type of Evidence	Brief Description	Unit(s) It Relates To

Evidence types may include: work records, employment history, previous qualifications/transcripts, third-party reports, work samples/portfolios, performance appraisals, position descriptions, volunteer experience records, or other relevant documents

## Section D: Overseas Qualifications (if applicable)

Complete this section only if you answered 'Yes' to Question 5 above.

Qualification Name	Issuing Institution	Country	Year Completed

Note: Overseas qualifications will be assessed for equivalence against Australian training product requirements using recognised frameworks. Equivalence will not be assumed based on the title of a qualification alone.

## Section E: Applicant/Student Declaration

By signing this form, I declare and acknowledge that:

- I have read and understood the RPL Student Information Sheet and the RPL Policy (CPL036).
- I understand that RPL is a thorough assessment process and that a successful outcome is not guaranteed.
- All evidence I submit is my own genuine work and accurately represents my skills, knowledge, and experience. I have not submitted materials independently generated by artificial intelligence (AI) tools as my own work.
- I understand that if AI-assisted drafting has been used in preparing any written evidence, I must demonstrate genuine understanding of and personal contribution to the evidence during the competency conversation.
- I understand that the assessor may contact my current or former employers, supervisors, or referees to verify the authenticity of evidence I have provided.
- I understand that RPL assessment fees are non-refundable regardless of the RPL outcome, as the fee covers the cost of the assessment service.
- I understand that if my evidence does not fully meet the unit requirements, I may be offered targeted gap training for the areas not yet demonstrated, rather than needing to repeat the entire unit.
- I understand that providing false or misleading information may result in the cancellation of any RPL outcome and may constitute academic misconduct.
- I consent to Shafston retaining all RPL assessment evidence and records for a minimum of two (2) years from the date of the assessment decision.

Applicant Name		Date	
Applicant Signature			

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## Section F: Unit(s) of Competency Requested for RPL

Please list each unit of competency for which you are applying for RPL. You can find unit details at training.gov.au.  
Use additional copies of this page if more space is required.

No.	Unit Code	Unit Name	Superseded?	Overseas?
1			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
2			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
3			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
4			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
5			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
6			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
7			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
8			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
9			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
10			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
11			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
12			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
13			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
14			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
15			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Total units requested for RPL:

'Superseded?' — Tick Yes if you have completed a superseded version of this unit at another institution.

'Overseas?' — Tick Yes if your evidence for this unit includes overseas qualifications or experience. If Yes, complete Section D.

## Section G: For Office Use Only

Application Received By		Notes
Date Received		
RPL Fee Quoted (\$)		
Fee Paid?	<input type="checkbox"/> Yes - Payment Ref: _____ <input type="checkbox"/> No	
Preliminary Assessment	<input type="checkbox"/> Proceed to RPL <input type="checkbox"/> Insufficient – refer to training	
Assessor Assigned		
Credential Verified?	<input type="checkbox"/> Yes - Credential held: _____	
RPL Kit(s) Issued	<input type="checkbox"/> Yes - Date: _____	