

# APPLICATION FOR RECOGNITION OF PRIOR LEARNING (RPL) & CREDIT TRANSFER (CT)

**Step 1:** Find out what RPL and CT are about and whether you are eligible or not. Focus during orientation and read up on our RPL/CT process on the website and in the student information brochure.

**Step 2:** Talk to a trainer about your background, experience, and previous qualifications to find out if you are possibly eligible for RPL in one of our courses or Credit Transfer on one of unit of competency.

**Step 3:** If the answer is a possible yes, then you should complete this application form. It must be completed in full and provide the support document prior to the submission.

Step 4: Submit the application for assessment.

Step 5: You may be interviewed by the assessor.

Step 6: You will be given an answer in person and/or in writing.

**Step 7:** If your application is granted, you will have an alternate course timetable with adjusted attendance and fees accordingly.

#### Notes to assist you to complete this application form

If you are applying for direct <u>CREDIT TRANSFER</u> only (for Students who have completed exact competencies in previous learning) please complete this page and Page 2 only and attach copies of qualifications /statements of competencies already achieved.

If you are applying for <u>**RECOGNITION OF PRIOR LEARNING**</u> because you feel your previous courses/programs or previous employment, voluntary, and life experience is similar to the competencies outlined please complete this page and Page 3 and 4 only.

#### **Student's Personal Details**

Full Name	
Student Number	
Address	
Email address	
Mobile Number	
Course	
Place of Employment (if applicable)	



## DIRECT CREDIT TRANSFER STUDENTS

TKL College offers direct credit transfer to students who have completed equivalent units and have evidence of Qualification, Statement of Attainment/s, and Statement of Results/s.

## PLEASE LIST UNIT/S & ATTACH A COPY OF QUALIFICATION/S AND STATEMENT/S

Details of the Previous Study		Credit Transfer Sought from TKL Subjects		Office use	
Unit Code / Unit Title	Year	Unit Code	Unit Title	*G	R
Name of the Previous Institution				 	
Attachment: [ ] Transcript	[ ] Oth	er:			

## **Declaration by Student**

I believe that the information I have completed in this application is true and correct.

Student's Signature\_\_\_\_\_ Date\_\_\_\_

## Office use only

Academic	Remaining Units:		Student Services Officer
No of Units Credited: Adjusted Course Duration: Approved by:	Tuition Fees: Credit Transfer Fees		[] Update academic record [] Update database Processed by: Date:
Date:			
G*: Granted R*: Refused	Admissions:	Accounts:	
Notes:	[ ] L.O.O	Payment:	
	[ ] C.O.E	Processed by: Date:	
	Processed by:		
	Date:		



## **RECOGNITION OF PRIOR LEARNING STUDENTS**

## TRAINING EXPERIENCE

Training Courses/Programs previously attended which you consider relevant to the program you are now entering.

List units for which you are seeking RPL

Unit Code	Unit Title

Details of previous training programs attended where you believe they relate to the above units.

Qualification/ Statement date of issue	Qualification Title	Units the Qualification/ Statement relates to

## PLEASE ATTACH COPIES OF:

- Qualification/s and/or Statement/s of Attainment as mentioned above
- Statement of Results listing competencies achieved
- Any other documented evidence

## **RELATED WORK AND LIFE EXPERIENCE**

Current or previous work-related activities you believe support your application for recognition of prior learning

Year/s and months experience	Unit Number these Activities relate to



## PLEASE PROVIDE ANY OTHER INFORMATION OR EVIDENCE TO SUPPORT THIS APPLICATION

Please return this application to your training representative for processing. A desktop assessment of your application and supporting documents will be followed up with you by telephone and a meeting where required. Results will be provided to you in writing.

## **OFFICE USE ONLY**

## **Recognition of Prior Learning Results**

Assessors Decision:

Date results are given to Student:

Assessor:\_\_\_\_\_Signature:\_\_\_\_\_

Date:

Support given to Student	Date
Pre-interview and self-assessment	
Evidence gathering	
Assessment Interview conducted	

## **Evidence submitted**

Evidence	Tick	Evidence	Tick
Work samples		Observation at work/training site	
Third-party reports		Demonstration of tasks	
Interview questions		Qualification/statements	
Documents from training			