

RPL APPLICATION FORM

PURPOSE

Students with prior skills, knowledge and competencies are supported to seek Recognition of Prior Learning to progress through the relevant training product. This form is to be used as an initial expression of interest in seeking RPL for a unit or a number of units. It is intended as a first step only and more detail regarding the RPL process will be provided on receipt of the application. The completed form must be returned to training@internationalparamediccollege.com.au for processing. For more information, refer to the Recognition policy.

STUDENT PERSONAL DETAILS

First Name		Given Name	
Date of birth		Address	
Email Address		Phone number	

TRAINING PRODUCT DETAILS

Training product name and code student is seeking RPL for	
Are you currently enrolled in this Training product?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Units of competency student is seeking RPL for	

EMPLOYMENT DETAILS			
Currently Employed Yes/No		Given Name	
Employer or type of employment		Contact number	
Position Title			
Duties performed			
I authorise the RTO to contact employers/referees to verify evidence provided.	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Please supply a brief summary of the evidence that can be supplied to support the RPL application.

Do you have a resume or a CV?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Provide details of any past training, workshops or courses that are directly relevant to the training product and/or units you are seeking RPL for	
Provide details of employment history or work experience that is relevant to the training product and/or units you are seeking RPL for	
Provide details of any relevant life experience or other evidence that demonstrates skills and knowledge aligned to the training product and/or units	

Student signature		Date	
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