



OFFICE USE ONLY	
Received by: _____	
Signature: _____	
Payment received: _____	
Supporting evidence provided:	
YES <input type="checkbox"/>	NO <input type="checkbox"/>
Date: ____ / ____ / ____	

AMA SKILLS TRAINING

APPLICATION FOR RECOGNITION OF PRIOR LEARNING

STUDENT DETAILS:		
Name:	Address:	P/code:
Telephone:	Mobile:	Email:

Application process
<p>Prior to completing this form you should talk to the Training Manager to familiarise yourself with the process moving forward and also get a better understanding of the chances of your success in application for RPL.</p> <p>You should also ask the Training Manager for a copy of the course outline and performance criteria for each competency you believe you may gain RPL.</p> <p>If you assess yourself as meeting the elements, performance criteria and associated components of the training package then you should complete this application and pay the appropriate fees.</p>

Which course are you seeking RPL?
Qualification Code: Title:

List the units you are applying for RPL in the table below:

UNIT CODE	UNIT DESCRIPTION

Please Note: There is a fee to assess students for RPL. This is dependent on the selected units of competency. This fee must be provided with the completed application form and evidence. There is no refund of the RPL fee should the student be deemed as unsuccessful in RPL.

Our RPL Assessor will review your application and make the decision as to your application for competency. The evidence you supply must match the course learner outcomes fully and satisfy the assessor that you genuinely have the skills and knowledge you are presenting for recognition.

If recognition of previous learning is assessed as unfavourable, you will have the chance to appeal the decision at little or no cost. Refer to the complaints and appeals policy and subsequent complaints and appeals application form.

EMPLOYMENT DETAILS:		
Employer	Address	P/code
Contact	Position	
Telephone	Email	

List the relevant Education/Training you have completed in table below:

COURSE/EDUCATION (ie: Certificate/Diploma/Degree)	ORGANISATION (TAFE/University/Company/Private Provider)	COURSE DURATION (Number of Hours/Weeks/Years)

List the Subjects you have studied in the table below:

SUBJECT DETAILS (Course Title/Description of Key Areas covered)	SUBJECT DURATION (Number of Hours/Weeks/Years)

Detail your Employment History below:

NAME OF COMPANY EMPLOYER	POSITION AND DUTIES PERFORMED	EMPLOYMENT DURATION (ie: List Dates from and until – full or part time)

List the Supporting and Additional Evidence below:

EVIDENCE/SUPPORTING DOCUMENTS ATTACHED	Tick below
Detailed Resume/Curriculum Vitae	<input type="checkbox"/>
Third Party Report	<input type="checkbox"/>
Work Experience examples	<input type="checkbox"/>
Professional Conversation	<input type="checkbox"/>
Statement Transcript of units completed (Original req)	<input type="checkbox"/>
Personal Experiences	<input type="checkbox"/>
Non Accredited Course	<input type="checkbox"/>
Volunteer Work	<input type="checkbox"/>
Other:	<input type="checkbox"/>

I hereby declare that all details in this application are true and accurate.

Applicant Signature: _____ Date: _____

Thank you for completing this application

IMPORTANT

Please ensure you have attached all transcripts/course certificates undertaken and details of work duties to support your application. Detailed completion of this form will assist in your assessment for Recognition of Prior Learning.
The Training Manager will be in contact with you and will forward you written advice of the assessment outcome in due course.