

RECOGNITION OF PRIOR LEARNING (RPL) – APPLICATION FORM

1. Recognition Area				
Course applying for recognition?				
2. Personal Details				
(Mr, Mrs, Ms, Miss) First Name/s and Surname				
Email Address				
Gender MALE □ / FEMALE □	Are you a permanent Resident of Australia? Y	ES 🗆 / NO 🗆		
Date of Birth / /	Age			
Student Number:				
Are you a currently studying at International College of Queensland?	□ NO □ YES → Go to Question No. 3			
Local Address Street Suburb				
Postal address if different from above				
Telephone Numbers	Home:	Work:		
	Mobile:	Fax:		
3. Current Employment				
Are you currently employed?	YES 🗆 / NO 🗆			
If Yes, in which occupation are you currently employed?				
Who is your current employer?				
4. Employment History and Training History				
What is your role within your organisation?				



What information do you think you need	
to learn for your role in your organisation?	
Do you work alone or part of a team?	
What level of responsibility do you have in	
your organisation?	
What problems in your organisation are you responsible for solving?	
you responsible for solving:	
What decisions within your organisation	
do you need to make?	
What legislative requirements are you	
required to follow in your role?	
What organisational requirements i.e.	
policies, procedures, codes of practice are you required to follow in your role?	
you required to follow in your role.	
Have you undertaken any training courses	YES □ NO □
related to the occupation applied for?	
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If Yes	
What occupation were you trained in?	
Training completion Date (month, year)	
Country where you trained	
Name of course and institution (if applicable)	
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5. Is there any further information you wish to give in support of your application					
6. Professional Referees (relevant to work situation)					
Name					
Position					
Position					
Organisation					
Phone Number					
Thore williber					
Mobile Number					
Email Address					
Name					
Position					
Organisation					
Phone Number					
Mobile Number					
Free! Address					
Email Address					



APPLICANT EMPLOYMENT HISTORY FORM

Name, Address and Phone number of Employers	Period of Employment (DD/MM/YYYY)		Position Held	FT, PT or	Description of Major Duties
	From	То		Causal	
1.					
2.					
3.					

Documented Evidence

If you are including documents in your application, please provide a brief description below. If you have an Australian Qualification or Statement of Attainment, please attach a verified copy.

Document Description	Office Use Only – Assessor to use this section to align
(e.g. Qualifications, Statement of Attainment, Resume, Photos,	documents to specific units of competency and identify
Awards , Certificates etc)	key questions for competency conversation
Received by? Date received?	
Application approved by:	
Application declined:	
Evidence provided:	
Student advised:	
Declaration	
I declare that the information contained in this application is tru	ue and correct and that all documents are genuine.
Candidate Signature:	Date

^{*}Attach additional sheet if required