

## RECOGNITION OF PRIOR LEARNING APPLICATION FORM (Vocational Education & Training [VET])

This form is to be used for **VET** students who are applying for exemption on the basis of work experience - Recognition of Prior Learning (RPL). This Form to be read in conjunction with the Course Credit and Articulation Policy & Procedure (<u>Documents</u>> Public Policies and Forms > > POLICY—Course Credit and Articulation Policy & Procedures) which outlines the requirements and states that you must have a minimum of three (3) years work experience to apply. If an applicant is applying for credit based on <u>both</u> Formal Study and Work experience **50% of the course** is the <u>maximum</u> that can be credited in total.

PERSONAL DETAILS							
Title:	Mr.	Ms.	Mrs.	Miss	Other:		
Family Name:							
Given Names:							
Date of Birth:					Gender	Male	Female
Street Address (Australia)  **Must NOT be a PO Box. Kent will send all communications to this address.							
Suburb				State:	Post	code:	
Email Address	Mobile Phone:						
KENT Student ID:	USI Number:						

## Copy of Curriculum Vitae/Resume attached

KENT COURSE OF STUDY					
Course Code	Name of course of study	Month and Commencing Year			

List the Units of Competency that you are seeking recognition for:						
Unit/Subject Code	Name of Unit/Subject	APPROVED				
		YES	NO			
		YES	NO			
		YES	NO			
		YES	NO			
		YES	NO			
		YES	NO			
		YES	NO			

PREVOUS EXPERIEN	NCE			
What is the highest level of				
formal schooling achieved?  What year was this schooling				
completed				
	Name of institution and			
completed	where was this schooling completed			
Details of any studio	es you may ha	ve undertaken s	since leaving school	
Attach evidence of	results:	Yes	No	
			and translated in English if applicable by a li	
Date of Course	Level of Stud (eg. Apprentices		<b>Details of Study</b> (ie. Title of trade, name of course, etc.)	Results
	Industry course,		the rate of trade, name of course, etc.,	
WORK EXPERIENCE				
Employer #1 Employer's Name	•			
Employer's Addr	ess			
Employment Dat	es	From:	То:	
Position Title				
List key tasks in t				
and briefly describe the				
work/nature of work related to this RPL application				
Employer #2				
Employer's Name				
Employer's Address				
Employment Dates		From:	To:	
Position Title				
List key tasks in this position				
and briefly describe the				
work/nature of work related to this RPL application				
to this it is application				

Notes: Please attach an additional page if required.

## STUDENT DECLARATION AND SIGNATURE

(Please Tick Boxes Below to confirm)

I have read the Kent Course Credit and Articulation Policy and Procedures and I do understand the requirements.

The information I have provided in this Form is true and correct to the best of my knowledge. I acknowledge that the provision of incorrect information may result in my application being rejected by Kent.

I understand that Kent will notify the Department of Immigration and Border Protection (DIBP) of any changes to my Confirmation of Enrolment (CoE) as the result of this application.

Student Signature:		Date:				
SUBMIT FORM with accompanying documents via  Desk. Please allow ten (10) business days to proces			s@kent.ed	du.au or in person at the Ca	ampus Reception	
OFFICE USE ONLY – The RPL Application for t	ne student	named a	above has	been reviewed and con	firmed below:	
APPLICATION APPROVAL						
I approve the requested RPL as recorded on the T	able (Page 1	1).		Approved	Declined	
The number of Units/Subjects the student needs	to complete	e in the co	urse of stu	udy is:		
Comments:						
Signature:						
Position:						
Date:						
STUDENT ADMINISTRATION:						
OFFICE USE ONLY						
Student advised of outcome of this application Date		/	1	Staff Initials:		
New written agreement signed	Date:	/	/	Staff Initials:		
DIBP advised of changed details via PRISMS	Date:	1	1	Staff Initials:		
Student File Updated on SIS (RTO Manager)	Date:	1	1	Staff Initials:		