RPL Application Form



Section 1 – Client Details								
Client	Name:		Date:	/	/			
Phone:								
Address:								
Email	:							
Quali	fication / Course:							
Section	n 2 – Application a	nd Declaration						
Client	:							
	I wish to apply for	Recognition of Prior of Learning for the units	of compet	ency/mod	ules listed below.			
	I have attached or providers.	iginal copies of certificates I have achieved pr	eviously fr	om other o	courses and training			
	I declare that certi	fication documentation supplied is legitimate	e, true and	correct.				
	I understand that	the Assessor will verify my certification docun	nentation f	for validity	<i>'</i> .			
		fee of $\$$ for document administration est that is required for me to confirm my con		of \$ <u></u>	per assessment			
		and that Travel and accommodation for an Assessor to conduct on site assessments (if will be added to any assessment fees quoted.						
	I understand that the RPL process is an assessment only process whereby I submit evidence. NextGen Skills will count any competency achievement towards any grading in future competency based summative assessments.							
	I understand that there is no training or learning guide provided to me in this process and that I am using this process to fast track my certification.							
	I understand that supporting eviden	NextGen Skills is not responsible for searching ce.	g, or discov	ering any i	information or			
	I understand that I am responsible to supply all supporting evidence and information required by NextGen Skills, and I shall pay any additional search and discovery fees incurred as a result of insufficient evidence being provided.							
	I understand that I shall not be entitled to any refund of fees in the event that I do not meet the competency standards and that any further training and assessments I require shall be at my expense at the current NextGen Skills rate.							
	I have supplied a copy of my most recent CV / Resume to demonstrate my industry experience and education.							
*Client Signature: Date: / /								
*I have read the RPL Policy and understand that if this application is successful that a RPL pack will be provided to me for the relevant units of competency, at a briefing session. I understand that I will only receive RPL for those modules upon successful submission of all requirements as outlined in the RPL Pack for each module.								
Section 3 – Workplace Referees who can support my RPL Application								
Referee 1								
Full N	ame:		Phone:					

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						-
Address:						
Email						
Referee 2						
Full Name:			Phone:			
Address:						
Email						
Section 4 – Unit	s /Modu	les Outcome				
				Assess	or Only	
Unit Code	Unit	Name	Evidence supplied	Evidence Verified	Progress to RPL Pack	Assessor Initial

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Section 5 – Assessor Endorsement								
I declare that there is sufficient evidence to warrant the client progressing through RPL process for the above noted units/modules.								
Assessor Na	Assessor Name (Print): Assessor Signature Date:							
				/ /				
Admin Use Only								
SMS Updated:	Yes	☐ No	Date:	/	/	Initial:		
Client file updated:	Yes	☐ No	Date:	/	/	Initial:		

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