

# RPL Application Form

Enrolment Details					
Are you enrolling in a full qualification or part qualification (i.e. individual units)?				<input type="checkbox"/> Full Qualification	<input type="checkbox"/> Individual units
Which qualification/units do you wish to enrol in?					
Personal Details					
Surname:		Title: Mr/Mrs/Miss/Ms/Dr		Date of birth: / /	
First name:		Middle name/s:			
Home address:					
				Postcode:	
Postal address: (if different from above)					
				Postcode:	
Home phone: ( )		Work: ( )			
Mobile:		Email:			
General Information					
1. Gender:		<input type="checkbox"/> Male <input type="checkbox"/> Female			
2. Are you a permanent resident of Australia?		<input type="checkbox"/> Yes <input type="checkbox"/> No			
Current Employment					
1. Are you currently employed:		<input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, is your main occupation related to the qualification in which you are seeking RPL?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
What is the name of your employer?					
2. If no to question 1 above, do you have a workplace where you will be able to be assessed on the job for the qualification in which you are seeking RPL?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Please provide details of the workplace.					
Further Training					
Have you undertaken any full qualifications related to the occupation of which you are seeking recognition?				<input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, training completion date (month, year):				Country:	
Name of course and institution (if applicable):					
Professional Referees (who have acted in senior capacity to you and can verify your skills)					
1. Name					
Position:		Organisation:			
Relationship to you:					
Phone number:		Mobile:			
Email address:					
2. Name					

Position:		Organisation:			
Relationship to you:					
Phone number:		Mobile:			
Email address:					
<b>3. Name</b>					
Position:		Organisation:			
Relationship to you:					
Phone number:		Mobile:			
Email address:					
<b>Previous Employment History</b> (attach additional sheet if required, or attach CV with these details included)					
Name, address and phone numbers of employers	Period of employment (DD/MM/YYYY)		Position held	FT/PT/Cas	Description of major duties
	From	To			
1.					
2.					
3.					
4.					
<b>Evidence for RPL Application</b> (you are required to include evidence to support your RPL application)					
Document description					Included?
Your current and detailed CV					<input type="checkbox"/>
Copies of Certificates of any formal and informal training you have participated in.					<input type="checkbox"/>
Current and previous (within the last 5 years) position descriptions and performance reviews (if available).					<input type="checkbox"/>
Copies of qualifications you have completed.					<input type="checkbox"/>
Any letters of support from employers or industry contacts (if available).					<input type="checkbox"/>
Contact details of at least 2 professional referees who have acted in a senior capacity to you in the workplace and who can verify your competency (as above).					<input type="checkbox"/>
Qualification Summary					<input type="checkbox"/>
Self-Assessment Checklists					For how many units?
<b>Declaration</b>					
I declare that the information contained in this application is true and correct and that all documents are genuine.					
Candidate signature:		Date:	/	/	
Printed name:					

**Please return your RPL application and supporting documents to:**  
 ASTAR Training Institute Suite 5 & 6, 55 Phillip Street, Parramatta NSW 2150  
 Parramatta NSW 2150 or [info@astartraining.edu.au](mailto:info@astartraining.edu.au)