



Victoria Point State High School
VET RPL Application Form

Student to complete form and submit to the RTO Manager/s

Student Name:	
LUI Number:	Date of Birth: / /
Address:	
Telephone:	
Qualification Code: (e.g. BSB20107)	
Qualification Name : (e.g. Certificate II in Business)	
Unit/s of competency for which RPL is being sought	
Code:	Title:
Evidence being included:	
Code:	Title:
Evidence being included:	
Code:	Title:
<p>Please attach evidence for each unit to support your application. This could include:</p> <ul style="list-style-type: none"> Certificates/Statement of Results/Attainment Reference which can be contacted Resume Photos Performance reviews Job descriptions <p>You may be asked to provide further information/evidence, attend further interviews, complete written/oral assessment, and undertake demonstration of skills, workplace assessment/observation or skills test.</p> <p>Please be aware you may be required to undertake some or all of these depending on the evidence you provide and the qualification or course being applied for.</p> <p>I hereby certify that the information provided and the documentation attached are true and correct</p>	
Signed:	Date: / /

Office Use Only	
Trainer:	
Date received from student: / /	Date entered into register: / /
Register number:	
Unit of competency: _____ Evidence submitted meets requirements: <input type="checkbox"/> Yes <input type="checkbox"/> No RPL Result: <input type="checkbox"/> Granted <input type="checkbox"/> Denied <input type="checkbox"/> More Evidence Required	
Unit of competency: _____ Evidence submitted meets requirements: <input type="checkbox"/> Yes <input type="checkbox"/> No RPL Result: <input type="checkbox"/> Granted <input type="checkbox"/> Denied <input type="checkbox"/> More Evidence Required	
Unit of competency: _____ Evidence submitted meets requirements: <input type="checkbox"/> Yes <input type="checkbox"/> No RPL Result: <input type="checkbox"/> Granted <input type="checkbox"/> Denied <input type="checkbox"/> More Evidence Required	
Trainer Feedback: 	
Trainer Signature:	Date: / /