SWINBURNE UNIVERSITY OF TECHNOLOGY

Higher Education

Application for Recognition of Prior Learning (RPL)

TITLE (eg Mr,Mrs, Ms) _____ FAMILY NAME/SURNAME _____ STUDENT NUMBER | | | | | | | |

GIVEN NAMES _____ ARE YOU AN INTERNATIONAL STUDENT? YES ☐ NO ☐

ADDRESS _____ POSTCODE _____ EMAIL _____ FAX NO. _____

TELEPHONE _____ PROGRAM TITLE _____

RECOGNITION OF PRIOR LEARNING (RPL) (REFER http://www.ppd.swin.edu.au/default.htm). Follow the link to Student Information Services then Credit Transfer and Exemption (Higher Education).

RPL is based on learning gained outside a university, TAFE or equivalent institution. RPL acknowledges learning acquired in a "credentialled" context such as a program offered by a professional body or private educational institution, and learning acquired in an "uncredentialled" context such as through work or life experience. RPL usually involves a formal assessment of a student's prior learning.

PLEASE NOTE CERTAIN FACULTIES MAY REQUIRE A FURTHER FORM FOR RPL TO BE COMPLETED DETAILING LIFE EXPERIENCE. PLEASE CHECK WITH YOUR FACULTY OFFICE.

Have you previously applied for RPL or exemptions for your program at Swinburne? No ☐ Yes ☐ If YES, how many units of RPL or exemptions have you received?

International Students: DIAC will be advised of any reduction in your program duration resulting from approved RPL.

1. UNIT OF STUDY FOR WHICH RPL IS BEING SOUGHT:	GROUNDS UPON WHICH RPL IS SOUGHT:	RPL ASSESSOR'S RECOMMENDATION				
		YES	NO	SIGNED	NAME	DATE
2. PRECLUSIONS: Units of study for which an approved substitute must be undertaken	APPROVED SUBSTITUTE:	YES	NO	SIGNED	NAME	DATE

FACULTY OFFICE USE ONLY

TOTAL PERCENTAGE OF PROGRAM FOR WHICH CREDIT HAS BEEN/WILL BE GRANTED IF THIS APPLICATION IS APPROVED _____ %

MEETING DATE _____/_____/_____ TOTAL No. OF UNITS OF STUDY GRANTED RPL _____ EFTSL/CREDIT POINTS _____

For international students, indicate the time it will take the student to complete: Completion date: _____/_____ (month and year).

The Faculty must forward a copy of this form to Swinburne International if the RPL results in a program duration that is less than that specified in the student's offer letter.

SIGNATURE OF STUDENT ADMINISTRATOR DATE / / FORM NUMBER OF

SIGNATURE OF STUDENT

_____

DATE / /

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