

Application form for CT/RPL/RCC

(Credit Transfer (CT), Recognition of Prior Learning (RPL), Recognition of Current Competency (RCC))

Personal Details

First Name/s and Surname			
Gender	<input type="checkbox"/> MALE / <input type="checkbox"/> FEMALE		
Are you a current student?	<input type="checkbox"/> NO <input type="checkbox"/> YES	Student Number:	
Email Address	<input type="checkbox"/>		
USI Number			
Local Address Street Suburb			
Postal address if different			
Telephone Numbers	Mobile:	Home:	
Documented Evidence			
Name of previous institution			
Copy of Certificate Attached			
Copy of Statement of attainment attached			
Are you applying for RPL/RCC	<input type="checkbox"/> NO <input type="checkbox"/> YES		
If YES:- Your assessor at ITS will discuss with you in detail these items including evidentiary requirements to support.	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	paid or unpaid work experience prior formal training skills and knowledge gained on the job community work experience short course and work-based learning trade skills other life experience.	

COURSE DETAILS

Please tick the qualification from the table below for which the CT/RPL/RCC are being requested.

Qualification	CT/RPL/RCC applied for	Qualification	CT/RPL/RCC applied for
<input type="checkbox"/> SHB20216 Certificate II in Salon Assistant	<input type="checkbox"/>	<input type="checkbox"/> SHB30416 Certificate III in Hairdressing	<input type="checkbox"/>
<input type="checkbox"/> SHB20116 Certificate II in Retail Cosmetics	<input type="checkbox"/>	<input type="checkbox"/> SHB40216 Certificate IV in Hairdressing	<input type="checkbox"/>
<input type="checkbox"/> SHB30215 Certificate III in Make-Up	<input type="checkbox"/>	<input type="checkbox"/> SHB40115 Certificate IV in Beauty Therapy	<input type="checkbox"/>
<input type="checkbox"/> CHC43015 - Certificate IV in Ageing Support	<input type="checkbox"/>		<input type="checkbox"/>

Declaration:

I declare that the information contained in this application is true and correct and that all documents attached are genuine.

Candidate Signature: _____ **Date:** ____ / ____ / ____

Office use Only

Staff Member Received:	
Date Received:	
Application Approved or Declined:	
Reason Declined:	
Evidence Provided:	
Student Advised:	
RTO Manager Sign off:	