

M.S Aviation Pty Ltd T/A Australian School of Commerce

RTO NO. 41089 | CRICOS NO.: 03489A

Melbourne Campus: Level 4, 123-129 Lonsdale Street Melbourne, Victoria 3000 Australia

Hobart Campus: Level 4, 18 Elizabeth Street, Hobart Tasmania 7000 Australia

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ABN: 87 160 483 447



Australian
School of
Commerce

Recognition of Prior Learning Kit

Welcome to the Australian School of Commerce

Thank you for choosing the Australian School of Commerce as your assessor and allowing us to play a role in your journey.

We pride ourselves on professional, flexible assessment and providing you with the best experience possible to attain your goals.

We hope you are looking forward to your assessment and will aim to recognize the specific competencies you have demonstrated through work experience and professional learning.

I look forward to hearing of your achievements and providing support where I can. I trust you will enjoy your time with us and wish you every success in your learning.

Recognition Process

Recognition is a method of assessing if you have evidence of competency for a particular unit of competency that you are enrolled in. It is important to remember that Recognition is an **assessment process** not an assumption of competence.

Recognition is the determination, on an individual basis, of the competencies obtained by a student through:

- previous formal training
- work experience, and/or
- life experience.

Recognition therefore determines the subsequent advanced standing to which the student is entitled in relation to a course/qualification. The main focus of Recognition is what has been learned rather than how, where or when it was learned. Recognition focuses on both the demonstration of competence and the currency of that competence to industry standards.

It is important to note, the onus is on the student to document and present evidence to justify a claim for recognition and present their case to the satisfaction of the Assessor.

The Steps

Step 1: The Application process and RPL Application Form

- Preliminary discussion with trainer/assessor and ASOC regarding the RPL process, fees and exploration of suitable courses.

Step 2: Completing the RPL Self-Assessment Information Kit

- Self-evaluation of applicant's skills, knowledge and experience to student's chosen vocational area

Step 3: RPL Competency Conversation Kit

- This is also known as 'professional conversation' or 'learning conversation'.
- The purpose of the competency conversation is to gain a detailed insight into the applicant's relevant skills, knowledge and experience.

Step 4: RPL Demonstration and Observation Kit

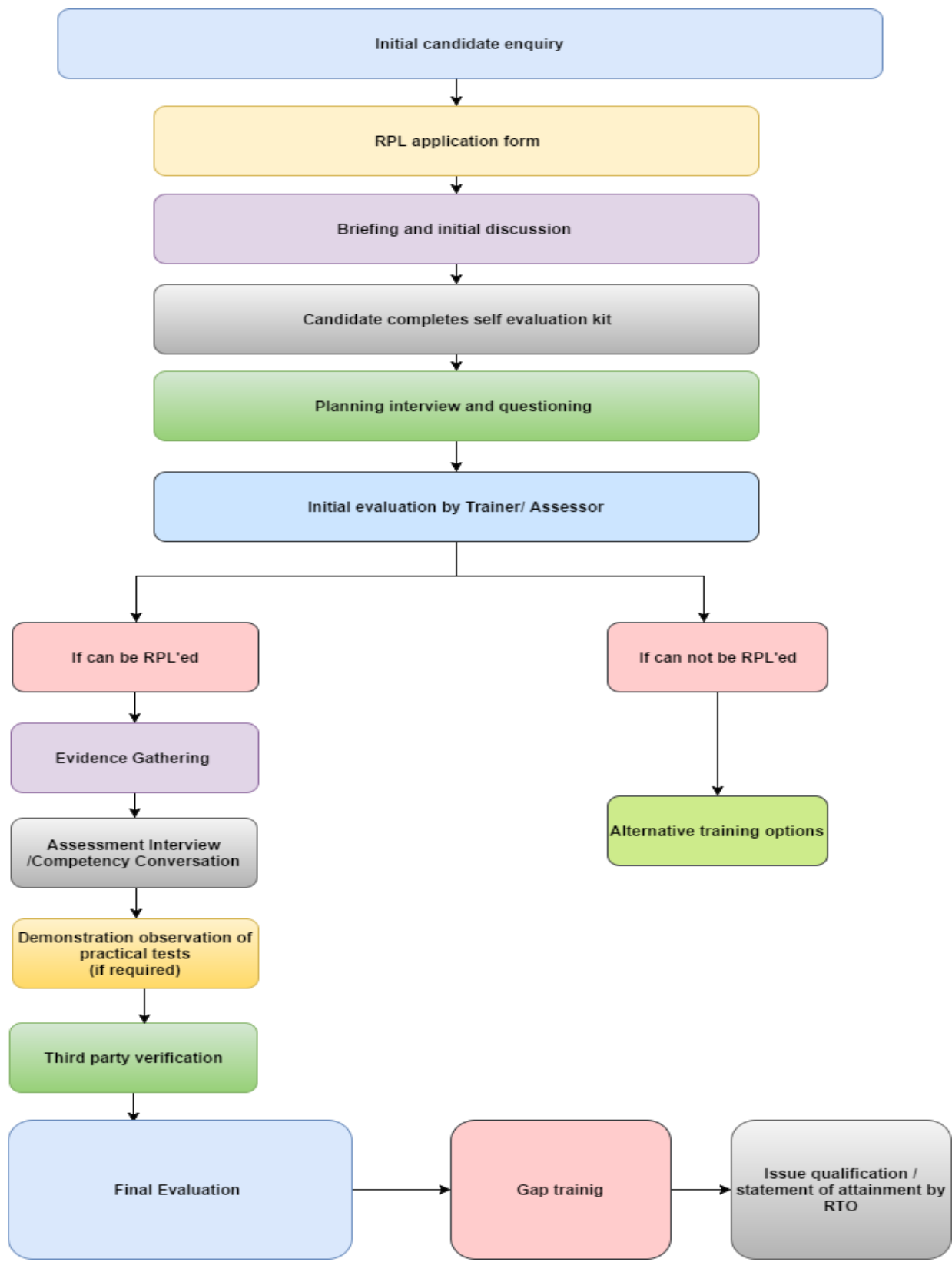
- A list of projects and tasks are provided to applicant to perform to demonstrate their relevant skills, knowledge and experience.

Step 5: Third-Party Evidence Kit

- Confirmation and authentication step where the information provided in step 3 and 4 will be used as a basis for verification with the applicant's supervisor (past and/or present).

Step 6: Finalisation of RPL Process

- This involves all the processes the assessor and ASOC undertake to finalise the RPL assessment process for the candidate. This includes actions such as determining final assessment outcomes, providing candidates with feedback and options, completing ASOC - required documentation, and awarding candidates with the qualification or a Statement of Attainment.



Recognition Decision

Regardless of the type of evidence that you submit, Assessors must be confident that the evidence meets the following criteria:

- Full requirements of the Unit of Competency(s);
- Any Regulatory requirements;
- Authenticity – That it is your own evidence and can be authenticated;
- That you can perform the competency consistently and reliably;
- Is at the standard expected in industry and set out in the Australian Qualification Framework (AQF);
- Sufficiency – There is sufficient evidence to make a judgment.

ASOC is committed to ensuring that all judgments made by Assessors against the same competency standards are consistent. Your Assessor will examine the evidence that you present and then make a judgment on that evidence which will be either:

- Competent (C) – you have been deemed competent against all the requirements of the Unit/s of Competency
- Not Yet Competent (NYC) – you have not yet demonstrated competency to all requirements.

Your assessor will advise you what you can do if you receive a NYC for your assessment task. If you are deemed NYC in your initial assessment, you are allowed a second attempt. However, if you are deemed NYC in the second attempt, you will be required to re-enrol. Please talk to your assessor if you have any concerns.

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RPL APPLICATION FORM

Please use BLOCK LETTERS when filling out this form and ensure that all sections are completed, and appropriate tick boxes marked as applicable. Information collected on this application form is confidential and will not affect you as an individual in your studies.

1. Personal Details (including full legal name)

Title (Mr, Miss, Ms, Mrs, Other):		<input type="checkbox"/> Male	<input type="checkbox"/> Female	
Surname:	<i>(If single name only, enter here)</i>			
First Name:		Middle Name(s):		
Preferred Name:		Date of Birth:		

2. Your Contact Details

Home Phone:		Mobile Phone:	
Email Address:		Work Phone:	
Preferred Contact Method:	<input type="checkbox"/> Via Mobile Phone <input type="checkbox"/> via Email <input type="checkbox"/> via Post (address below)		<i>(please tick one)</i>

3. Your Emergency Contact

Name:		Relationship:	
Home Phone:		Mobile Phone:	
		Work Phone:	

4. Your Address Details

Usual Residential Address (Not a PO Box)			
Building/Property Name:			
Flat/Unit Number:		Street No:	
Street Name:		City/Town:	
State:		Postcode:	

5. Residential Address Used While Studying (if different to Usual Residential Address)

Building/Property Name:			
Flat/Unit Number:		Street No:	
Street Name:		City/Town:	
State:		Postcode:	



6. Postal Address				
<input type="checkbox"/> Please tick if same as usual Residential Address.				
Building/Property Name:				
Flat/Unit Number:		Street No:		PO Box:
Street Name:	City/Town:			
State:	Postcode:			

7. Workplace Employer Details (if applicable)			
Trading Name:			
Contact Name:		Supervisor Name:	
Trading Address:			
Phone:		Employer email:	

8. Language and Cultural Diversity		
Are you of Aboriginal/Torres Strait Islander origin?	<input type="checkbox"/> No <input type="checkbox"/> Yes, Torres Strait Islander	<input type="checkbox"/> Yes, Aboriginal <input type="checkbox"/> Yes, Aboriginal & T.S. Islander
In which country were you born?	<input type="checkbox"/> Australia	<input type="checkbox"/> Other (please specify below) _____
Do you speak a language other than English at home?	<input type="checkbox"/> No (English only)	<input type="checkbox"/> Yes (please specify below) _____
If you speak a language other than English at home, how well do you speak English?	<input type="checkbox"/> Very Well <input type="checkbox"/> Not well	<input type="checkbox"/> Well <input type="checkbox"/> Not at all

9. Unique Student Identifier (USI)	
<p>A Unique Student Identifier (USI) is a reference number made up of numbers and letters that gives students access to their USI account. A USI will allow an individual's USI account to be linked to the National Vocational Education and Training (VET) Data Collection allowing an individual to see all of their training results from all providers including all completed training units and qualifications.</p> <p>It is a government requirement that a student needs a USI when enrolling or re-enrolling in nationally recognised training from 1 January 2015. This includes if the student is enrolling for the first time, for example, if they are studying at TAFE or with a private training organisation, completing an apprenticeship or skill set, certificate or diploma course. It also applies to students continuing or completing (re-enrolling) training, including nationally recognised training undertaken in secondary school.</p>	
Do you have a USI?	
<input type="checkbox"/> Yes	Enter your USI: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
<input type="checkbox"/> No	I give ASOC permission to create, view and update a USI on my behalf. Using the personal details entered on the two forms of Identification I have provided ASOC. <ul style="list-style-type: none"> • Driver's Licence • Citizenship Certificate • Medicare Card



	<ul style="list-style-type: none"> • Visa (with Non-Australian Passport) for international students • Certificate of Registration by Descent • Australian Passport 	<ul style="list-style-type: none"> • Birth Certificate (Australian) • Immi Card
<p>Student Signature: _____ Date: _____</p>		

10. Education Details	
Are you still attending secondary school?	<input type="checkbox"/> No <input type="checkbox"/> Yes
What is your highest COMPLETED school level? (Not inclusive of higher education)	Tick one box only: <input type="checkbox"/> Completed Year 12 <input type="checkbox"/> Completed Yr. 9 or equivalent <input type="checkbox"/> Completed Year 11 <input type="checkbox"/> Completed Yr. 8 or lower <input type="checkbox"/> Completed Year 10 <input type="checkbox"/> Never attended school
In which year did you complete this school level? (must be answered – even if education was completed overseas)	
If still attending school, name of school:	
Previous secondary school (if applicable):	

11. Employment Status	
Which of the following categories BEST describes your current employment status?	Tick one box only: <input type="checkbox"/> Employed – unpaid worker in a family business <input type="checkbox"/> Self-employed – not employing others <input type="checkbox"/> Not employed – not seeking employment <input type="checkbox"/> Unemployed – seeking full time work <input type="checkbox"/> Unemployed – seeking part time work <input type="checkbox"/> Full time employee <input type="checkbox"/> Part time employee <input type="checkbox"/> Employer
Where are you employed?	
How many employees are at your current employer?	<input type="checkbox"/> Up to 20 <input type="checkbox"/> Over 20

12. Occupation	
Which of the following classifications BEST describes your current (or recent) occupation?	Tick one box only: <i>(if you never employed go to next section)</i> <input type="checkbox"/> 1 – Managers <input type="checkbox"/> 2 – Professionals <input type="checkbox"/> 3 – Technicians & Trade Workers <input type="checkbox"/> 4 – Community and Personal Service Workers



	<input type="checkbox"/> 5 - Clerical & Administrative Workers <input type="checkbox"/> 6 - Sales Workers <input type="checkbox"/> 7 - Machinery Operators & Drivers <input type="checkbox"/> 8 - Labourers <input type="checkbox"/> 9 - Other
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13. Industry of Employment

<p>Which of the following classifications BEST describes the Industry of your current (or recent) Employer?</p>	<p>Tick one box only: <i>(if you never employed go to next section)</i></p> <input type="checkbox"/> A - Agriculture, Forestry and Fishing <input type="checkbox"/> B - Mining <input type="checkbox"/> C - Manufacturing <input type="checkbox"/> D - Electricity, Gas, Water & Waste Services <input type="checkbox"/> E - Construction <input type="checkbox"/> F - Wholesale Trade <input type="checkbox"/> G - Retail Trade <input type="checkbox"/> H - Accommodation & Feed Services <input type="checkbox"/> I - Transport, Postal & Warehousing <input type="checkbox"/> J - Information Media & Telecommunications <input type="checkbox"/> K - Financial & Insurance Services <input type="checkbox"/> L - Rental, Hiring & Real Estate Services <input type="checkbox"/> M - Professional, Scientific & Technical Svc's <input type="checkbox"/> N - Administrative Support Services <input type="checkbox"/> O - Public Administration and Safety <input type="checkbox"/> P - Education & Training <input type="checkbox"/> Q - Health Care & Social Assistance <input type="checkbox"/> R - Arts and Recreation Services <input type="checkbox"/> S - Other Services
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14. Disability

<p>Do you consider yourself to have a disability, impairment or long-term condition?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>If yes, please indicate the areas of disability, impairment or long-term condition.</p>	<p>You may indicate more than one:</p> <input type="checkbox"/> Hearing/deaf <input type="checkbox"/> Intellectual <input type="checkbox"/> Mental illness <input type="checkbox"/> Vision <input type="checkbox"/> Physical <input type="checkbox"/> Acquired brain impairment <input type="checkbox"/> Learning <input type="checkbox"/> Medical condition <input type="checkbox"/> Other (Please specify): _____



15. Previous Qualifications/Education	
Have you successfully COMPLETED any of the following qualifications?	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>If yes, please tick ONE applicable box relating to your prior education at ANY applicable Level as follows:</p> <p>A = Australian Qualification E = Australian Equivalent* I = International</p>	<p>A E I</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Bachelor's degree or Higher Degree</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Advanced Diploma or Associate Degree</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Diploma or Associate Diploma</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Certificate IV or Advanced Cert/Technician</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Certificate III or Trade Certificate</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Certificate II</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Certificate I</p> <p><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Other (please specify): _____</p>
<p>If multiple of one type, use above priority order (A), (E) and then (I). *To determine 'Australian Equivalent' qualifications, please refer to the Overseas Qualifications Unit (OQU).</p>	

16. Study Reason	
<p>Of the following reasons, which BEST describes your main reason for undertaking this course / traineeship / apprenticeship?</p>	<p>Tick one box only:</p> <p><input type="checkbox"/> To get a job</p> <p><input type="checkbox"/> To develop my existing business</p> <p><input type="checkbox"/> To start my own business</p> <p><input type="checkbox"/> To try for a different career</p> <p><input type="checkbox"/> To get a better job or promotion</p> <p><input type="checkbox"/> It was a requirement of my job</p> <p><input type="checkbox"/> I wanted extra skills for my job</p> <p><input type="checkbox"/> To get into another course of study</p> <p><input type="checkbox"/> For personal interest or self-development</p> <p><input type="checkbox"/> Other Reasons: _____</p>

17. Student Contact															
<p>How did you find out about the course you are enrolling in?</p>	<p>Tick one box only:</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Job Services</td> <td><input type="checkbox"/> Social Media (e.g. Facebook)</td> </tr> <tr> <td><input type="checkbox"/> Staff Member</td> <td><input type="checkbox"/> Apprentice Centre</td> </tr> <tr> <td><input type="checkbox"/> Current/Past Student</td> <td><input type="checkbox"/> Newspapers</td> </tr> <tr> <td><input type="checkbox"/> Flyer</td> <td><input type="checkbox"/> Workplace</td> </tr> <tr> <td><input type="checkbox"/> Website</td> <td><input type="checkbox"/> Other (please specify): _____</td> </tr> <tr> <td><input type="checkbox"/> Radio advertising</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Word of mouth</td> <td></td> </tr> </table>	<input type="checkbox"/> Job Services	<input type="checkbox"/> Social Media (e.g. Facebook)	<input type="checkbox"/> Staff Member	<input type="checkbox"/> Apprentice Centre	<input type="checkbox"/> Current/Past Student	<input type="checkbox"/> Newspapers	<input type="checkbox"/> Flyer	<input type="checkbox"/> Workplace	<input type="checkbox"/> Website	<input type="checkbox"/> Other (please specify): _____	<input type="checkbox"/> Radio advertising		<input type="checkbox"/> Word of mouth	
<input type="checkbox"/> Job Services	<input type="checkbox"/> Social Media (e.g. Facebook)														
<input type="checkbox"/> Staff Member	<input type="checkbox"/> Apprentice Centre														
<input type="checkbox"/> Current/Past Student	<input type="checkbox"/> Newspapers														
<input type="checkbox"/> Flyer	<input type="checkbox"/> Workplace														
<input type="checkbox"/> Website	<input type="checkbox"/> Other (please specify): _____														
<input type="checkbox"/> Radio advertising															
<input type="checkbox"/> Word of mouth															



18. Student Handbook

The student handbook outlines the following:

- | | | |
|--|--|---|
| <input type="checkbox"/> Student fee information | <input type="checkbox"/> Complaints procedure | <input type="checkbox"/> Student welfare and support services |
| <input type="checkbox"/> Refund Policy | <input type="checkbox"/> Appeals procedure | <input type="checkbox"/> Recognition of prior learning |
| <input type="checkbox"/> Code of conduct | <input type="checkbox"/> Assessment guidelines | |

I declare that I have read and understood the ASOC's student handbook and their policies & procedures regarding the above.

Student Signature: _____ Date: _____

The Student Handbook can be found on the ASOC's website.

19. Australian Citizenship Status

- Australian Citizen New Zealand Citizen Permanent Resident Other (please provide details): _____

20. Program / Qualification to be Enrolled In

21. Pre Training Checklist (Please tick the correct boxes)

- | | |
|--|---|
| <input type="checkbox"/> Pre-training form completed | <input type="checkbox"/> Entry Requirements discussed |
| <input type="checkbox"/> Language, Literacy, Numeracy and Digital Skills (LLND) assessment completed by student and attached | <input type="checkbox"/> Credit Transfer discussed |
| <input type="checkbox"/> Delivery Mode discussed | <input type="checkbox"/> Location of the course discussed |
| <input type="checkbox"/> Recognition of Prior Learning (RPL) discussed | <input type="checkbox"/> Tuition fees, Concession and Exemption discussed |
| <input type="checkbox"/> Refund Policy discussed | <input type="checkbox"/> Student question answered |
| <input type="checkbox"/> I have read and understand the student handbook. | <input type="checkbox"/> Please indicate any special needs, assistance you may require during the course (e.g Writing assistance) |

22. Acknowledgment of the Privacy Statement, and Declaration of Information Accuracy

Collection of your data

The Department may use the information provided to it for planning, administration, policy development, program evaluation, resource allocation, reporting and/or research activities. For these and other lawful purposes, the Department may also disclose information to its consultants, advisers, other government agencies, professional bodies and/or other organisations.

I have been advised by the ASOC that I may be contacted and requested to participate in a National Centre for Vocational Education Research survey or a Department-endorsed project or audit or review.

For more information in relation to how student information may be used or disclosed please contact ASOC on Phone no. 1300 781 194 (within Australia only) or +61 493891886 (Overseas) .

Consent for publication of photographs and student work

ASOC occasionally takes photos of students participating in classes for publicity purposes. These photos may be displayed on our website. The names and details of the people in the photos are not released or published. Staff will always identify when they are taking photos so students who don't wish to have their photo taken can be excluded from the photo. If at any time your photo is published on the website and you would like it removed, we will do so within 24 hours of receiving a written request to remove it.

- Do you consent to the use of your photo under these conditions? Please circle one: Yes No
- If you indicated NO please ensure you advise the staff member at the time the photo is being taken to ensure you are excluded from the photo.

You are required to give permission in writing for any of these discussions or viewing of evidence to occur.

- I will be required to participate in the completion of a National Students Outcomes Survey [NCVER], during the course of my training program.

Declaration of Information Accuracy

I declare that the information I have provided on this enrolment form is true and accurate and understand that providing false information may affect my eligibility to obtain government funding.

In signing or emailing this form I acknowledge and declare that;

1. I have read and understood and consent to the privacy notice and have completed all questions and details on the enrolment.
2. The information herein provided is to the best of my knowledge true, correct and complete at the time of my enrolment.
3. Arrangements have been made to pay all fees and charges applicable to this enrolment.
4. I have read and understand the ASOC Information for Learners Handbook.
5. I agree to be bound by the ASOC Student Code of Conduct, regulations, policies and disciplinary procedures whilst I remain an enrolled student.
6. My participation in this course is subject to the right of ASOC to cancel or amalgamate courses or classes. I agree to abide by all rules and regulations of ASOC.
7. I understand and have been provided with information by ASOC in relation to Credit Transfer and Recognition of Prior Learning (RPL).
8. I confirm that I have been informed about the training, assessment and support services to be provided, and about my rights and obligations as a student at ASOC.



9. I have also visited the ASOC website to review Training and Assessment options available to me including but not limited to duration, location, mode of delivery and work placement (if any), fees, refunds, complaints and withdrawals.
10. I authorise ASOC or its agent, in the event of illness or accident during any ASOC organised activity, and where emergency contact next of kin cannot be contacted within reasonable time, to seek ambulance, medical or surgical treatment at my cost.
11. My academic results will be withheld until my debit is fully paid and any property belonging to ASOC has been returned.
12. I acknowledge that from time-to-time ASOC may send me information regarding course opportunities and other promotional offers and that I have the ability to opt out.

Signed (Applicant):	Date:
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