

## Recognition of Prior Learning RPL / Credit Transfer Application Form

- 1. Complete Sections A to D.
- 2. Attach certified copies of academic transcripts and qualifications.
- 3. Attach relevant subject outlines

Applications are assessed on a case-by-case basis and take into consideration:

- The AQF level of the course completed.
- The relevance of the prior learning to the course applied for.
- No fees apply to review academic credit applications

Students will be advised of the outcome of their application within 14 days of their application being received by Student Administration.

SECTION A - PERSONAL DETAI	ILS
First Name	
Last Name	
Date of Birth	
Student ID (if applicable)	
Course	

SECTION B - PREVIOUS STUD	Y / PRIOR LEARNING
Name of Institution	
Course Name	
Year Study Completed	
Relevant Work Experience (if applicable)	

**Privacy Notice:** Information collected is used for lawful educational and compliance purposes under the Privacy Act 1988 (Cth) and the VET Data Policy. Details may be shared with government agencies (e.g., PRISMS, NCVER) as required.

Institute of Management and Computing Pty Ltd.

RTO No. 91615 | CRICOS Code: 04220M | ABN: 52 123 503 480

Address: Unit 1/61 Riggall Street, Broadmeadows, Melbourne, VIC, 3047, Australia

Phone: +61 391 913 448 | Email: info@imc.vic.edu.au | Website: www.imc.vic.edu.au

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SECTION C – ADVANCED STANDING	REQUESTED			CE USE
Unit Code	Unit Name			NLY proved
			□ Yes	□ No
			□ Yes	□ No
			□ Yes	□ No
			☐ Yes	□ No
			☐ Yes	□ No
			☐ Yes	□ No
			□ Yes	□ No
			□ Yes	□ No
			□ Yes	□ No
			□ Yes	□ No
			-1	
☐ I declare that the information provided is my documents by contacting the issuing pro☐ I have attached all relevant supporting do	vider.	ete. Institute h	as the righ	t to verify
Applicant Name:	ourneme.			
Applicant Name: Applicant Signature:		Date	e:	
Applicant Name: Applicant Signature:	ICE USE ONLY	Date	9:	
Applicant Name: Applicant Signature:  OFF SECTION E – COURSE DURATION Has the course duration been affected?		Date □ No	<b>:</b> :	
Applicant Name: Applicant Signature:  OFF SECTION E – COURSE DURATION Has the course duration been affected? Course start date	ICE USE ONLY		9:	
Applicant Name: Applicant Signature:  OFF SECTION E – COURSE DURATION Has the course duration been affected?	ICE USE ONLY		9:	
Applicant Name: Applicant Signature:  OFF SECTION E – COURSE DURATION Has the course duration been affected? Course start date Course end date	ICE USE ONLY		<b>:</b>	
Applicant Name: Applicant Signature:  OFF SECTION E – COURSE DURATION Has the course duration been affected? Course start date Course end date Comments  OFFICE USE ONLY SECETION F – FINAL APPROVAL	ICE USE ONLY		<b>:</b>	
Applicant Name: Applicant Signature:  OFF SECTION E – COURSE DURATION Has the course duration been affected? Course start date Course end date Comments  OFFICE USE ONLY SECETION F – FINAL APPROVAL CEO Name:	ICE USE ONLY	□ No		
Applicant Name: Applicant Signature:  OFF SECTION E – COURSE DURATION Has the course duration been affected? Course start date Course end date Comments  OFFICE USE ONLY SECETION F – FINAL APPROVAL	ICE USE ONLY			

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