****

**REGIONAL TEACHING PARTNERS**

**Recommendation for the Award of Recognition of Prior Learning (RPL)**

|  |  |
| --- | --- |
| **College** |  |

|  |  |
| --- | --- |
| **Student Name** |  |

|  |  |
| --- | --- |
| **Programme Applied for & Total Programme Credits** |  |

|  |  |
| --- | --- |
| **Total of RPL Credit Applied for (number of credits)** |  |

|  |  |  |
| --- | --- | --- |
| **Modules for which RPL is recommended. Please list with credits.** | | |
| **Module Title** | **Number of Credits** | **Type of RPL – Credit Transfer/APL/ APEL** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Supporting Evidence –** please attach relevant module descriptors and documentary evidence showing the candidate has met the learning outcomes of the modules applied for.

This should include the covering matrix of module learning outcomes against the supporting evidence.

|  |
| --- |
| **This recommendation for the award of credit by RPL has been formally considered within the College according to College procedures (and in the case of APL/APEL credit ratified through exam board procedures).**  **Signature Programme Leader:** ..........................................................................................  **Date of College Panel:** .......................................................................................................  **Panel members (minimum of 3 required):** |
| **Recommendation Approved.**  **Programme Consultant Approval:** ..................................................................................  **AQSC Approval:** ................................................................................................................. |