



**Unique
International
College**
Education for life..

Unique International College Pty Ltd
RTO ID Number: 91350
CRICOS Code: 02876J
Tel: 0061 2 9637 2006
Fax: 0061 2 9637 2009
ABN: 27 120 557 851 ACN: 120 557 851
www.uniquecollege.com.au info@uniquecollege.com.au
Level 1, 60 South Street Granville,
NSW Australia, 2142

Student Exemption Form

Course & Code: _____

Student Name: _____

Student No: _____

Date: _____

Type of Recognition (Tick all that apply)

Credit Transfer ☐ Recognition of Prior Learning ☐ Recognition of Current Competencies ☐

Evidence Supplied

Statement of Results		Reference which can be contacted	
Accredited Certificate		Resume	
Subject Outline including Performance Criteria		Examples of relevant work samples	
Personal Resume		Other:	
Position Description			

Unit name and code	RPL / CT (circle) Yes / No	Nominal Hours	Institution:	Qualification



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TOTAL HOURS:	FEES REDUCED: \$
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Comments:

The competencies of the above student have been reviewed and exemption for the requested subject has been:

☐

Approved

☐

Not Approved

Authorise Sign: _____

Date: _____

Declaration by Student

- I declare that the information supplied in this exemption form and any supporting documents submitted with this application is correct and complete.
- I understand that the college may terminate my enrolment if I have misrepresented or failed to fully and completely state my academic record and my attendance at each other tertiary institution attended by me
- I understand that the college may contact other institutions attended by me to verify the information provided which pertains to my enrolment at that institution, and to seek other relevant information about me.
- I understand that the college may contact the employer to confirm my employment history and to verify the information provided in my CV
- I understand that I must attend all enrolled classes until I receive notification of the outcome of this application for credit or exemption
- I understand that if I am granted credit in my enrolment, my course duration may be reduced which may affect my student visa. In this instance I understand that I should contact DIAC for clarification

Student Sign: _____

Date: _____



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COURSE:

STUDENT NAME:

STUDENT No:

Unit/s of Competency	Hours	Fee Reduction
Total Fees		\$

Course Tuition Fees: \$

DATE:

Total Exemptions Fees: \$

Assessors' Signature: _____

Adjusted Fee Total: \$



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Checklist for Office use only

- Student has submitted all relevant documents to assess application further ☐
- RPL (recognition of prior learning)/ CT (credit transfer) has been assessed by the assessor ☐
- A final outcome has been made by the assessor and has been checked by Compliance Manager for quality purposes ☐
- RPL/CT register has been updated by Compliance Manager ☐
- Course duration has been appropriately adjusted via PRISMS by Compliance Manager ☐
- Student has been notified in writing of the outcome ☐

I declare that all aspects of this application have been completed.

Compliance Manager Signature: _____

Date: _____