

Appendix 6 – Recognised Prior Learning (RPL)/Recognised Current Competence (RCC) Assessment Report

Applicant's name: _____

Competency <i>Insert competency learning outcome details</i>	Evidence Supplied	Validity <i>(is the evidence relevant to the performance criteria?)</i>	Sufficiency <i>(is there enough evidence?)</i>	Authenticity <i>(is the evidence a true reflection of the candidate?)</i>	Current <i>(is the evidence recent? obtained within the last four years?)</i>	Comments
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	

<<Note: Continue to insert extra spaces for additional competencies/learning outcomes>>

All competencies/learning outcomes met: (please circle)

YES

NO (please provide advice to the applicant of what evidence they are still required to supply)

Name of Assessor: _____ Date of Assessment: _____

Position: _____ Contact number _____

Assessor's comments	Recommendations