



RPL Record of Evidence

Supporting application for

HLT41007 Certificate IV in Health Care (Ambulance)

Your Details:

Given Names.....
(please use legal name)

Family Name.....
(please use legal name)

Postal address

Suburb

State

Post Code

Contact Phone:.....

Email address

What happens next>

1. Complete the RPL application and payment authority for \$100-00 Fee for Service (non-refundable). This \$100-00 is a Fee for Service to **review** the suitability of your RPL application. (Should you then choose to proceed with the RPL Assessment, the \$100-00 will be considered as part payment of the RPL Fee)
2. Send to: Allens Training 36 Chantry St GOULBURN NSW 2580
3. Your application is reviewed for suitability and you will be contacted either by email or telephone to discuss eligibility for recognition. (This is not the RPL assessment, but a review of the suitability of your application)
4. RPL Fee payable for application to be assessed.
5. Full assessment of your RPL application is completed and you will be notified of the outcome.
6. If further training is required to obtain the qualification, we will assist you to complete this, dependant on the availability of an instructor in your area. Any gap training undertaken must be completed within 12mths

HLT41007

Certificate IV in Health Care (Ambulance)

Student Information RPL APPLICATION

Before you start

The qualification focuses on work in the ambulance industry done by volunteers or workers who provide a basic emergency response and transport roles in areas where there is a relatively low workload. Occupational titles may include:

Volunteer ambulance officer

Ambulance community officer

Ambulance attendant

Honorary ambulance officer

Casual ambulance officer

Emergency patient transport officer

To achieve a qualification in this course 19 Units must be completed.

Code	Unit of Competency	Core/ Elective
HLTHIR301B	Communicate and work effectively in health	C
BSBFLM303C	Contribute to effective workplace relationships	C
HLTOHS300B	Contribute to OHS processes	C
HLTIN301C	Comply with infection control policies & procedures	C
HLTAP401B	Confirm physical health status	C
HLTAMBAE403C	Follow procedures for routine safe removal of client	C
HLTAMBSC401B	Manage routine scene and promote public safety	C
HLTAMBFC301C	Communicate with clients & colleagues to support health care	C
HLTAMBCR401B	Deliver basic clinical care	C
HLTHIR402C	Contribute to organisational effectiveness in the health industry	C
HLTAMBPD401C	Manage personal stressors in the work environment	C
Elective units		
HLTAMBFC402C	Communicate in complex or difficult situations	E
HLTHIR404D	Work effectively with Aboriginal & Torres Strait Islander people	E
HLTHIR403C	Work effectively with culturally diverse clients and co-workers	E
CHCCS400B	Work within a relevant legal and ethical framework	E
HLTAMBT301B	Transport non-emergency clients under operational conditions	E
TAEASS403A	Participate in assessment validation	E
TAEASS401A	Plan assessment activities and processes	E
TAEASS402A	Assess competence	E

Other electives that can be considered for RPL applications are

HLTAMBAE501C Implement safe access and egress in an emergency
HLTAMBAE504C Follow procedures for safe extrication of clients in life threatening situations
HLTAMBC403C Coordinate resources
HLTAMBSC503B Contribute to managing the scene of an emergency
HLTAMBT402C Transport emergency clients
PUASAR001B Participate in a rescue operation
TAEASS301A Contribute to assessment

What is recognition?

Recognition of Prior Learning (RPL) is an assessment process that allows for recognition of competencies currently held, regardless of how, when or where the learning occurred. RPL assesses your prior learning to determine the extent to which you are currently competent against the competency requirements of a unit or a whole qualification / course

Recognition of Prior Learning is an acknowledgment of your current skills and knowledge that you have obtained through formal training, work experience and life experience. This should be able to be demonstrated by your work experience, or other qualifications that you have completed. RPL is not an examination; it is an opportunity for you to demonstrate your competency. You may not have the exact associated units, however you may have other qualifications, or validated work experiences that may be able to be mapped to the same criteria.

If you consider you are already competent in specific units of competency from your chosen course you may be eligible to be granted an exemption if:

- Your prior learning and experience is relevant to this course
- You are able to supply **proof** of subject-relevant formal training (conducted by industry or educational institutions), or relevant work experience.
- Submission of authenticated documents or samples of work demonstrating relevance and currency
- You may be able to supply work related evidence that can be used as evidence towards this qualification

A judgment must be made about whether the applicant wholly or partially meets the requirements. The evidence submitted will be checked ensure that it conforms to the principles of evidence:

- Validity (is the evidence relevant?)
- Sufficiency (is there enough evidence?)
- Authenticity (is the evidence a true reflection of the candidate?)
- Currency (is the evidence recent - obtained within 2 years?)

As the applicant, you are responsible for matching your experience and current qualifications to the relevant performance criteria in the RPL forms.

Evidence

It is not enough to state that you have the skills and knowledge required to demonstrate competence. Current evidence must be provided to obtain RPL status.

For eg. You may work in the health industry and be required to follow OHS on a daily basis.

To demonstrate evidence of this, you might submit a sample of some of the policies & procedures in your workplace regarding safe work practices, OHS meetings attended, workshops attended, in-service training records. One of these on its own would not be sufficient to obtain RPL, but several of these may combine to form an overall competence.

If you are uncertain whether you have the required evidence, please contact us for assistance.

Currency

For a qualification or experience to be deemed current, it must have been obtained within a reasonable timeframe.

For eg. You may have trained as a nurse 5 or more years ago. If you have continued employment in this field since obtaining the qualification, currency could be evidenced by records of continued training (inservice) and a current nurse registration. However, your original certificates are still required.

If you have not continued work in the field, the qualification would not be considered to be current.

Relevant work experience

If you have been working in an industry/role that is the same, or similar, to the nationally recognised qualification, then you have probably developed skills and knowledge that can be assessed for credit towards the qualification. If you have completed on-the-job training, this can also be used as evidence.

Relevant qualifications

You may be able to apply for recognition towards the qualification based on previous studies. Allens Training recognises and accepts Australian Qualifications Training Framework (AQTF) qualifications issued by other registered training organisations.

Your previous studies will be recognised and credited towards your current qualification by way of mutual recognition.

Benefits of recognition

The benefits of recognition of prior learning mean:

- Less time studying units that you are already competent in
- No need to study the same thing twice
- Recognition may help you meet the entry requirements for higher level qualifications
- Up to 100% of recognition of your qualification may be granted.

What evidence can I use?

There are several types of evidence you can use to show your skills, experience and attributes for assessment against the unit(s) of competency. This evidence required starts with an up to date resume, outlining your previous study undertaken, qualifications gained and your work experience. Any documentation submitted, must be sighted and signed by a JP. Evidence can be sent either electronically or by registered mail. Please do not send any material normal mail, as no responsibility can be taken for documents that are lost in transit and can not be traced.

Who is responsible for the process?

The RPL process involves providing valid evidence that demonstrates conclusively that you have the necessary skills and knowledge. *You as the applicant are required to match your experience and current skills against specific criteria as outlined in the RPL Checklist.* An RPL assessor will determine whether your evidence meets the requirements of each Unit.

The RPL Process

1. Complete the RPL form and complete payment details.
2. Collect your evidence for each unit of competence.
3. Complete the RPL checklist and submit to the assessor
4. Discuss with assessor the suitability of application.
5. Full RPL assessment of the application is completed.
6. Arrange a time to review the assessment and fulfil any requirements that cannot be provided in documentary form, such as observations, simulations or oral questioning that the assessor may deem necessary.
7. Review and submit further evidence if required.

What can be granted through RPL and who do I contact?

RPL can be granted for a whole qualification or for individual units of competence. If you believe that you can provide reliable and valid evidence - see list below under the heading 'Evidence' - to support your claims the first step is to contact the Course Coordinator and discuss the process.

RPL Fees

\$100-00 Fee for Service, to review suitability of RPL application
(non-refundable)

Prior to entering into a training contract, all RPL fees will be discussed.

Assessment Process

1. Collect relevant evidence. Certificates and transcripts must be JP witnessed.
2. The forms of evidence that might be supplied are outlined on the following page under "What types evidence you may provide"
3. Number each document and list them in the Document Table that will be attached as supporting documents. Record the same number in the Document Box for each unit. You may use one piece of evidence in several Units.
4. When you have gathered all the evidence submit it to the assessor along with the completed payment authority

The assessor will:

- review the suitability of your application
- contact you to discuss with you the application
- complete full assessment upon receipt of RPL fee
- May get back to you and ask you questions and then
- Make a decision as to whether your evidence is sufficient and appropriate.

If the evidence that you have provided is not sufficient, the assessor may:

1. Ask you to provide further evidence or
2. Seek a meeting to:
 - Observe you in action - to provide a practical demonstration of your skills, observe you at your workplace or another suitable venue
 - Ask you to participate in a simulation or
 - Conduct oral questioning.
3. Require a formal assessment to demonstrate your knowledge or skill.
4. Require you to complete gap training to meet the requirements of the unit

Appeals Process

If you are not satisfied with the final assessment decision, the right of appeal is available to all RPL candidates. If you disagree with the assessment decision please make this known to the assessor and the appeals process will be explained to you.

Information on the appeals process can be obtained from Allens Training.

The appeal must be submitted to the assessor within 21 working days of the formal notification of results

What types of evidence you may provide

Evidence is the proof that you have acquired relevant knowledge and skills required for each unit of competence. The following list indicates some of the forms of evidence that may be used to prove competence (if you feel you have other evidence to prove competence, please discuss your options with your assessor):

- **Qualifications**

If you possess a relevant qualification, the original document or a certified copy must be sighted by the RPL assessor. For all qualifications, the original transcript must be attached. Website printouts are not accepted.

- **Statements / Results**

Statements of Attainments, Academic records.

- **Workshop Records**

If you have attended relevant workshops, short courses, seminars or staff development activities provide originals or certified copies of any documents of achievement or attendance.

- **Job Sheets or Logs**

These documents could provide evidence that you have performed certain skills at specific times or over a period of time. They could provide evidence that you worked in a team or had a variety of roles or responsibilities.

- **Diaries / Journals**

May provide evidence similar to job sheets or logs but are more of a personal or private nature - possibly related to pastime activities or after hour's experiences. A journal may contain evidence of time management, operational planning, budgeting, reflections, etc.

- **Work samples**

Examples of work are a valid source of evidence. This can take the form of reports or proposals, session plans, multi media presentations, internal correspondence, physical objects or any other examples of work that support your claims. Video evidence is a useful means of demonstrating competence.

- **CV or Resume / Work History**

If using a CV for evidence of positions held or experience, please ensure that the authenticity of the information can be validated. Job descriptions may provide evidence if supplied on original company letterhead or signed by the previous employer. A work history can summarise skills you have learnt or practice over period of time.

- **References**

You can use these to verify anything you can't really document. References should be on company letter head, signed and dated and be verifiable.

- **Written Work**

Any documents you created that demonstrate knowledge or skills you have, such as reports, designs, drawings, promotional material, correspondence, policies, procedures you wrote.

- **Project Work**

Summaries of projects you planned, completed, or simply participated in. This may be in form of a written document, presentation, web based, CD-ROM or a portfolio.

- **Photos / Video**

Use to prove that you actually have carried out certain tasks or if you can't provide original pieces of work. A video sequence can demonstrate how you created something or how you applied manual or communication skills to achieve an outcome.

- **Emails**

Copies of emails might demonstrate that you have specific communication skills or can verify that you carried out an activity for which you claim competence.

- **Any other example of evidence that supports your claims**

Any evidence not listed above that supports your claim to demonstrate competence.

Checklist

Documents that need to be submitted with this application:

Completed RPL Application form - including Payment Authority

Current Resume/CV

Proof of Identity
e.g copy of Drivers licence or some other form of photo ID

Table of Documents & Evidence completed

Certified copies of all supporting documents

IMPORTANT


If you do not believe that you can show currency and competency with your employment and/or qualifications, then do not commence the RPL process.

It is up to you to clearly demonstrate how you can be awarded this qualification.

You will need a commitment to send in the required information in a detailed fashion in order for RPL to be given.


Table of Documents

Document 1	
Document 2	
Document 3	
Document 4	
Document 5	
Document 6	
Document 7	
Document 8	
Document 9	
Document 10	
Document 11	
Document 12	
Document 13	
Document 14	
Document 15	
Document 16	
Document 17	
Document 18	
Document 19	
Document 20	
Document 21	
Document 22	
Document 23	
Document 24	

APPLICANT TO COMPLETE													ASSESSOR TO COMPLETE														
Unit Code: HLTHIR301B						Unit Name: Communicate and work effectively in health																					
Elements						Evidence – Applicant to complete: Indicate type by placing attachment number into the box							Assessor's comments / Details of evidence Recommended gap training														
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.						Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO.	DOCUMENT NO.	Observation	Simulation	Oral Questioning	Gap identified Y/N		Competent Y/N			
Element 1: Work Ethically																											
Element 2: Communicate effectively in health system																											
Element 3: Practise high standards of personal hygiene																											
Element 4: Promote a positive approach to health																											
Element 5: Maintain professional work standards																											
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																											


Applicant Signature:

Date:

APPLICANT TO COMPLETE													ASSESSOR TO COMPLETE											
Unit Code BSBFLM303C						Unit Name: Contribute to effective workplace relationships																		
Elements						Evidence – Applicant to complete: Indicate type by placing attachment number into the box							Assessor's comments / Details of evidence Recommended gap training											
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.						Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO.	DOCUMENT NO.	Observation	Simulation	Oral Questioning	Gap identified Y/N		Competent Y/N
Element 1: Seek, receive & communicate ideas																								
Element 2: Encourage trust and confidence																								
Element 3: Identify & use networks and relationships																								
Element 4: Contribute to positive outcomes																								
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																								


Applicant Signature:

Date:

APPLICANT TO COMPLETE													ASSESSOR TO COMPLETE									
Unit Code HLT0HS300B					Unit Name: Contribute to OHS processes																	
Elements					Evidence – Applicant to complete: Indicate type by placing attachment number into the box								Assessor’s comments / Details of evidence Recommended gap training									
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.					Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning		Competent Y/N
Element 1: Plan & conduct work safely																						
Element 2: Support others in working safely																						
Element 3: Contribute to OHS participative processes																						
Element 4: Contribute to hazard identification, OHS risk assessment and risk control activities																						
Element 5 Participate in the control of emergency situations																						
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																						


Applicant Signature:

Date:

APPLICANT TO COMPLETE													ASSESSOR TO COMPLETE													
Unit Code HLTIN301C					Unit Name: Comply with infection control procedures																					
Elements					Evidence – Applicant to complete: Indicate type by placing attachment number into the box								Assessor's comments / Details of evidence Recommended gap training													
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.					Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO:	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/ N		Competent Y/ N			
Element 1: Follow infection control guidelines																										
Element 2: Identify and respond to infection risks																										
Element 3: Maintain personal hygiene																										
Element 4: Use personal protective equipment																										
Element 5 Limit contamination																										
Element 5 Handle, package, label, store, transport and dispose of clinical and other waste																										
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																										


Applicant Signature:

Date:

APPLICANT TO COMPLETE													ASSESSOR TO COMPLETE															
Unit Code HLTAP401B						Unit Name: Confirm physical health status																						
Elements						Evidence – Applicant to complete: Indicate type by placing attachment number into the box							Assessor's comments / Details of evidence Recommended gap training															
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.						Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/ N		Competent Y/ N				
Element 1: Obtain information about physical health status																												
Element 2: Check physical health status																												
Element 3: Identify variations from normal physical health status																												
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																												


Applicant Signature:

Date:

APPLICANT TO COMPLETE													ASSESSOR TO COMPLETE												
Unit Code HLTAMBAE403C				Unit Name: Follow procedures for routine safe removal of client																					
Elements				Evidence – Applicant to complete: Indicate type by placing attachment number into the box									Assessor's comments / Details of evidence Recommended gap training												
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.				Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/ N		Competent Y/ N			
Element 1: Assess non-emergency situation in relation to safe removal of the client																									
Element 2: Implement procedures for safe removal of the client																									
Element 3: Monitor removal procedure																									
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																									


Applicant Signature:

Date:

APPLICANT TO COMPLETE													ASSESSOR TO COMPLETE											
Unit Code HLTAMBSC401B				Unit Name: Manage routine scene and promote public safety																				
Elements				Evidence – Applicant to complete: Indicate type by placing attachment number into the box									Assessor's comments / Details of evidence Recommended gap training											
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.				Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/ N		Competent Y/ N		
Element 1: Attend non-emergency scene																								
Element 2: Take appropriate measures to ensure safety at the scene																								
Element 3: Represent and promote public safety issues																								
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																								


Applicant Signature:

Date:

APPLICANT TO COMPLETE													ASSESSOR TO COMPLETE									
Unit Code HLTAMBFC301C				Unit Name: Communicate with clients & colleagues to support health care																		
Elements				Evidence – Applicant to complete: Indicate type by placing attachment number into the box									Assessor's comments / Details of evidence Recommended gap training									
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.				Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/N		Competent Y/N
Element 1: Exercise effective communication techniques																						
Element 2: Convey & receive information using available modes of communication																						
Element 3: Follow routine <i>instructions</i>																						
Element 4: Communicate with clients																						
Element 5: Complete <i>reports</i> as required																						
Element 6: Present a positive image of the organisation to the public																						
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																						


Applicant Signature:

Date:

APPLICANT TO COMPLETE											ASSESSOR TO COMPLETE													
Unit Code HLTAMBCR401B				Unit Name: Deliver basic clinical care																				
Elements				Evidence – Applicant to complete: Indicate type by placing attachment number into the box							Assessor's comments / Details of evidence Recommended gap training													
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.				Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/N		Competent Y/N		
Element 1: Make initial client assessment																								
Element 2: Plan basic out-of-hospital client care																								
Element 3: Implement basic client care procedures																								
Element 4: Monitor basic client care and modify as required																								
Element 5: Hand over client requiring basic care																								
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																								


Applicant Signature:

Date:

APPLICANT TO COMPLETE											ASSESSOR TO COMPLETE														
Unit Code: HLTHIR402C					Unit Name: Contribute to organisational effectiveness in the health industry																				
Elements				Evidence – Applicant to complete: Indicate type by placing attachment number into the box							Assessor's comments / Details of evidence Recommended gap training														
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.				Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/N		Competent Y/N			
Element 1: Promote ethical work practice																									
Element 2: Contribute to client and organisation outcomes																									
Element 3: Contribute to organisational improvements																									
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																									


Applicant Signature:

Date:

APPLICANT TO COMPLETE											ASSESSOR TO COMPLETE																
Unit Code HLTAMBPD401C					Unit Name: Manage personal stressors in the work environment																						
Elements					Evidence – Applicant to complete: Indicate type by placing attachment number into the box						Assessor's comments / Details of evidence Recommended gap training																
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.					Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/N		Competent Y/N				
Element 1: Develop personal stress management plan																											
Element 2: Offer <i>support</i> to colleagues																											
Element 3: Receive <i>support</i> from colleagues																											
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																											


Applicant Signature:

Date:

APPLICANT TO COMPLETE													ASSESSOR TO COMPLETE									
Unit Code HLTAMBFC402C				Unit Name: Communicate in complex or difficult situations																		
Elements				Evidence – Applicant to complete: Indicate type by placing attachment number into the box									Assessor’s comments / Details of evidence Recommended gap training									
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.				Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/ N		Competent Y/ N
Element 1: Convey complex information																						
Element 2: Communicate with allied personnel																						
Element 3: Overcome barriers to communication																						
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																						


Applicant Signature:

Date:

APPLICANT TO COMPLETE												ASSESSOR TO COMPLETE															
Unit Code: HLTHIR404D						Unit Name: Work effectively with Aboriginal &/or Torres Strait Islander people																					
Elements						Evidence – Applicant to complete: Indicate type by placing attachment number into the box						Assessor's comments / Details of evidence Recommended gap training															
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.						Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/N	 Competent Y/N				
Element 1: Reflect an awareness of Aboriginal and Torres Strait Islander history and cultures in work practices																											
Element 2: Reflect an awareness of own and other cultural realities in work practices																											
Element 3: Communicate effectively with Aboriginal and Torres Strait Islander people																											
Element 4: Reflect cultural safety in workplace and professional relationships																											
Element 5 Work in partnership with Aboriginal and Torres Strait Islander people and communities																											
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																											


Applicant Signature:

Date:

APPLICANT TO COMPLETE													ASSESSOR TO COMPLETE									
Unit Code; HLTHIR403C				Unit Name: : Work effectively with culturally diverse clients and co-workers																		
Elements				Evidence – Applicant to complete: Indicate type by placing attachment number into the box									Assessor's comments / Details of evidence Recommended gap training									
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.				Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/N		Competent Y/N
Element 1: Reflect cultural awareness in work practice																						
Element 2: Accept cultural diversity as a basis for effective work place and professional relationships																						
Element 3: Communicate effectively with culturally diverse persons																						
Element 4: Resolve cross-cultural misunderstandings																						
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																						


Applicant Signature:

Date:

APPLICANT TO COMPLETE													ASSESSOR TO COMPLETE														
Unit Code CHCCS400B					Unit Name: Work within a legal and ethical framework																						
Elements					Evidence – Applicant to complete: Indicate type by placing attachment number into the box								Assessor's comments / Details of evidence Recommended gap training														
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.					Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/ N		Competent Y/ N				
Element 1: Demonstrate an understanding of legislation and common law relevant to work role																											
Element 2: Follow identified policies and practices																											
Element 3: Work ethically																											
Element 4: Recognise and respond when client rights and interests are not being protected																											
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																											


Applicant Signature:

Date:

APPLICANT TO COMPLETE											ASSESSOR TO COMPLETE														
Unit Code HLTAMBT301B					Unit Name: Transport non-emergency clients under operational conditions																				
Elements				Evidence – Applicant to complete: Indicate type by placing attachment number into the box							Assessor's comments / Details of evidence Recommended gap training														
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.				Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/N		Competent Y/N			
Element 1: Prepare and check vehicle and equipment																									
Element 2: Ensure faults in vehicle and equipment are remedied																									
Element 3: Convey and receive information using necessary modes of communication																									
Element 4: Load, unload and secure non-emergency client and other <i>specific personnel</i> for transportation																									
Element 5: Drive vehicle																									
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																									


Applicant Signature:

Date:

APPLICANT TO COMPLETE													ASSESSOR TO COMPLETE													
Unit Code TAESS403A					Unit Name: Participate in assessment validation																					
Elements					Evidence – Applicant to complete: Indicate type by placing attachment number into the box								Assessor’s comments / Details of evidence Recommended gap training													
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.					Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/ N		Competent Y/ N			
Element 1: Prepare for validation																										
Element 2: Contribute to validation process																										
Element 3: Contribute to validation outcomes																										
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																										


Applicant Signature:

Date:

APPLICANT TO COMPLETE													ASSESSOR TO COMPLETE												
Unit Code: TAEASS401A					Unit Name: Plan assessment activities and processes																				
Elements					Evidence – Applicant to complete: Indicate type by placing attachment number into the box								Assessor’s comments / Details of evidence Recommended gap training												
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.					Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/ N		Competent Y/ N		
Element 1: Determine assessment approach																									
Element 2: Prepare the assessment plan																									
Element 3: Develop assessment instruments																									
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																									

Applicant Signature:

Date:

APPLICANT TO COMPLETE													ASSESSOR TO COMPLETE															
Unit Code TAEASS402A						Unit Name: Assess Competence																						
Elements						Evidence – Applicant to complete: Indicate type by placing attachment number into the box							Assessor’s comments / Details of evidence Recommended gap training															
Number your documents that will be attached to the Checklist and record the same number in the boxes where you think this piece of evidence fits. You may use one piece of evidence in several Units.						Qualifications	Statements / Results	Workshop Records	Job Sheets or Logs	Diaries / Journals	Work samples	CV / Work History	References	Written work	Project work	Photos / Video	DOCUMENT NO	DOCUMENT NO	Observation	Simulation	Oral Questioning	Gap identified Y/ N		Competent Y/ N				
Element 1: Prepare for assessment																												
Element 2: Gather quality evidence																												
Element 3: Support the candidate																												
Element 4: Make the assessment decision																												
Element 5: Record and report the decision																												
Element 6: Review the assessment decision																												
Statutory Declaration: The attached JP copies of my evidence is a true and correct statement of fact concerning my training experience																												

Applicant Signature:

Date:

Return this completed form and supporting documentation to:

**Allens Training
RPL Applications
36 Chantry St
GOULBURN NSW 2580**

Applicant Declaration:

I, the applicant, declare that:

- This application is a true and accurate representation of my qualifications and work experience as it relates to the training package.
- I have presented originals to a Justice of the Peace for verification/certification

Signed:

Date:

All supporting documents are required to be signed by a JP - this includes proof of identity documents.

Payment Authority: \$100-00 Fee for Service
This Fee for Service is Non-refundable

Please indicate your preferred payment method:

Cheque (attached to this enrolment form)

Direct Deposit (remittance advice or proof of deposit attached to this form)
BSB and account details 032721 189065

Credit Card -

Card Type: VISA / MASTERCARD / AMEX / OTHER

Card Number:

Expiry Date:

CCV number: (Last 3 digits on back of card)

Amount to be paid \$ 100.00

All supporting documents are required to be signed by a JP - this includes proof of identity documents.

Payment Authority for RPL assessment

Please indicate your preferred payment method:

Cheque (attached to this enrolment form)

Direct Deposit (remittance advice or proof of deposit attached to this form)
BSB and account details 032721 189065

Credit Card -

Card Type: VISA / MASTERCARD / AMEX / OTHER

Card Number:

Expiry Date:

CCV number: (Last 3 digits on back of card)

Amount to be paid \$.00

All supporting documents are required to be signed by a JP - this includes proof of identity documents.