

# Student Exemption Form



Please ensure to fill this form correctly. Incorrect or incomplete forms will result in delays or rejections

Title: Mr / Ms / Miss / Mrs	Student Name:
Student Number:	Phone:
Course Title:	Email:
Group:	Date:

Type of Recognition (Tick all that apply)

Credit Transfer  Recognition of Prior Learning

Evidence Supplied (Tick all that apply)

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

List the details below of all units you are applying credit for

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

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## Student Declaration

All information provided by me in this form, including supporting documentation is true and correct, and I wish to apply for exemptions for the above named units of competency. I understand that where exemptions are granted that results in a shortening of my course, this information will be provided to the Department of Home Affairs through PRISMS and may affect my student visa.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Office use only

Application Received By	Name:	Signature:	Date:
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Challenge Exam Required YES / NO  
(Please circle)

The competencies of the above student have been reviewed and exemption for the requested units of competency has been:  
APPROVED / REJECTED

Action Taken By	Name:	Signature:	Date:
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Staff Comments:

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## EXEMPTION SUMMARY

<b>Title:</b> Mr / Ms / Miss / Mrs	<b>Student Name:</b>
<b>Student Number:</b>	<b>Phone:</b>
<b>Course Title:</b>	<b>Email:</b>
<b>Group:</b>	<b>Date:</b>

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

**Course Tuition Fees:**        \$ \_\_\_\_\_  
**Total Exemption Fees:**    \$ \_\_\_\_\_  
**Adjusted Fee Total:**        \$ \_\_\_\_\_

<b>Staff Signature:</b> _____	<b>Date:</b> _____
<b>Student Signature:</b> _____	<b>Date:</b> _____