Recognition of Prior Learning Application Form

- This form may be used for Credit Transfer, Cross Credit and Assessment of Prior Learning.
- Please use a pen and complete in English.
- You may apply for Recognition of Prior Learning at any time before your programme of study begins. However all applications should be received by your Programme Manager no later than two weeks after the first day of teaching of the courses/papers for which you are applying for credit. Please refer to the RPL Procedure, available from your Programme Manager.

**PART A  STUDENT TO COMPLETE**

1 PERSONAL INFORMATION

- Le Cordon Bleu New Zealand Student ID (if known)
- Surname or Family Name
- First Name(s)
- Preferred Name
- Previous Name(s) Known By
- Title
  - Mr
  - Mrs
  - Ms
  - Miss
  - None
  - Other, please specify
- Date of birth
- Qualification/Course Enrolled For
- Name of Courses For Which RPL Is Requested

2 CREDIT TRANSFER

No fee is incurred in applying for internal Credit Transfer within Le Cordon Bleu New Zealand Programmes.

Please ensure at least one of the following is attached:

- NZQA – Record of Learning
- Academic Records or Certificates

3 CROSS CREDIT

An administration charge of $50 (inc GST) will normally apply. An additional charge of $75 (inc GST) per hour may be incurred where a comparative analysis of learning outcomes is required.

Please ensure at least one of the following is attached:

- NZQA – Record of Learning
- Academic Records or Certificates

4 ASSESSMENT OF PRIOR LEARNING

An administration charge of $50 (inc GST) will apply plus an additional fee of $75 (inc GST) per hour for the comparative analysis of learning outcomes.

Which method do you wish to use for this assessment?

- Portfolio
- Challenge Assessment
- Attestation
- Interview

List all documentation attached:
5 STUDENT DECLARATION

I certify that the information provided is correct. I agree to pay all fees (GST inclusive) as detailed in this form.
I understand that I must complete the course requirements I am applying to have credited until I am informed of the outcome of this application by Le Cordon Bleu New Zealand Institute.

Signature: ___________________________ Date: ____________

PART B LCBNZI USE ONLY – APPROVE/DECLINE DETAILS

6 CREDIT TRANSFER ASSESSOR DECISION

DOES NOT require Academic Committee approval

☐ Credit Transfer Approved  ☐ Credit Transfer Declined

Outline here the exact credit awarded or reason for decline ____________________________________________________________

Signature: ___________________________ Date: ____________

7 CROSS CREDIT PROGRAMME LEADER DECISION

REQUIRES Academic Committee/BOS approval

☐ Cross Credit Approved  ☐ Credit Transfer Declined

Outline here the exact credit awarded or reason for decline ____________________________________________________________

Signature: ___________________________ Date: ____________

8 ASSESSMENT OF PRIOR LEARNING PROGRAMME LEADER DECISION

REQUIRES Academic Committee/BOS approval

☐ Assessment of Prior Learning Approved  ☐ Assessment of Prior Learning Declined

Outline here the exact details of credit recommended to Academic Committee

Signature: ___________________________ Date: ____________

9 ACADEMIC COMMITTEE/BOS APPROVAL FOR CROSS CREDIT/ASSESSMENT OF PRIOR LEARNING

Academic Committee Approves:  ☐ Cross Credit or ☐ Assessment of Prior Learning

Academic Committee Declines:  ☐ Cross Credit or ☐ Assessment of Prior Learning

N. B. Student to be notified in writing and copy attached to this form before forwarding to Registry

Signature: ___________________________ Date: ____________

(Academic Committee Chairperson)

10 ASSESSMENT COSTS CROSS CREDIT AND ASSESSMENT OF PRIOR LEARNING

GST Inclusive

Administration Charge: ___________________________ Number of Hours of Assessment at $75 (inc GST) per hour: ___________________________ Total Costs of Assessment: ___________________________

Ledgers to be credited:

The Administration Charge and Hours of Assessment Fee are to be credited as follows:

Domestic student 1203.301  International student 1212.301

Documentation Complete: ☐ Yes  ☐ No

Processed by: ___________________________ Date: ____________