

Application for Recognition of Prior Learning

Evolution Hospitality Institute

RTO # 91256 CRICOS 02869G



Name: _____

Date of Application: ____/____/____

Date of Birth: __/__/__

Phone Number: _____

Address: _____

email: _____

I request an assessment of my current skills and experience as they apply to the units of competency selected below. (If you have a credit transcript from a registered training provider stating you have completed units of competency, you need to fill out an 'Application for Recognition of Prior Learning Form' and provide the original transcript.)

I wish to apply for Credit Transfer for the following units:

UOC Code	Unit Name	tick
THHBKA01B	Organise and prepare food	
THHBKA02B	Present food	
THHBKA03B	Receive and store kitchen supplies	
THHBKA04B	Clean and maintain kitchen premises	
THHBCC01B	Use basic methods of cookery	
THHBCC00B	Prepare sandwiches	
THHGH501B	Follow workplace hygiene procedures	
THHCOR01B	Work with colleagues and customers	
THHBCC02B	Prepare appetizers and salads	
THHBCC03B	Prepare stocks, soups and sauces	
THHBCC04B	Prepare vegetables, eggs and farinaceous	
THHCOR02B	Work in a socially diverse environment	
THHCOR03B	Follow health safety and security procedures	
THHCO01B	Develop and update hospitality industry knowledge	
THHCCH01A	Prepare cook and serve food (holistic)	
THHGGA01B	Communicate on the telephone	
THHGCS02B	Promote products and services to customers	
THHGCS03B	Deal with conflict situations	

THHGTR01B	Coach others in job skills	
THHCCH02A	Prepare cook and serve food for menus	
THHBCC05B	Prepare and cook poultry and game	
THHBCC06B	Prepare and cook seafood	
THHBCC07B	Select prepare and cook meat	
THHBCC08B	Prepare hot and cold desserts	
THHBCC09B	Prepare pastry cakes and yeast goods	
THHBCC10B	Plan and prepare food for buffets	
THHBCC11B	Implement food safety procedures	
THHBCAT01B	Prepare foods according to dietary and cultural needs	
THHBCC13B	Plan and control menu based catering	
THHBPT01B	Prepare and produce pastries	
THHBPT02B	Prepare and produce cakes	
THHBPT03B	Prepare and produce yeast goods	
THHADPT03B	Present desserts	
THHADPT04B	Prepare and display petit fours	
THHADCCC06B	Prepare chocolate and chocolate confectionary	
THHADPT08B	Plan, prepare and display sweet buffet show pieces	
THHADPT06B	Prepare desserts to meet specific dietary requirements	

Are you employed? Y/N

If yes: Position: _____

Company Name: _____

Employers name: _____

Address: _____

Contact Number: _____ **Please Turn Over...**

Application for Recognition of Prior Learning

Evolution Hospitality Institute

RTO # 91256 CRICOS 02869G



Submit this form to Administration or Reception. An appointment will be made for you with the Director of Studies to discuss critical evidence required and methods of assessing. Bring all supporting documents with you to this interview.

Evidence of competency can be collected from other sources such as current job performance, resumes with supporting documents, logbooks, job descriptions, projects or assignments or workplace interviews. Bring anything you think may support your application.

You will be notified at this interview the fees applicable for your assessment. Fees must be paid before assessment can commence.

Once you have paid the fee, the application data will be assessed and any interviews arranged and you will be notified of the outcome of your application within 2 weeks. You will be contacted by email if any clarification on documents is required. Any certificates or transcripts requested will be forwarded to your address. If you disagree with the outcome of any assessments, you may have the application reviewed under the guidelines of Evolutions appeals policy.

Fee Schedule:

Assessment of Individual Units (per unit)	\$100.00
Assessment of full Certificate III	\$2500.00
Workplace observation and interview*	\$500.00
Issuing a Certificate/transcript	\$50.00
Challenge test (per unit)**	\$250.00
Challenge test (full qualification)	\$3000.00

* Workplace observation requires four hours, and an appointment with the management of the workplace. This is required for any full qualification requesting RPL.

** Students are required to purchase produce for these tests

Student Acknowledgement:

I am satisfied with the outcome of my application. If any units I applied for were not approved, the reasons were explained to me.

Signed: _____ date: _____

I am not satisfied with the outcome of my application, and I request an Assessment Appeal Form.

Signed: _____ date: _____

ADMIN USE ONLY

- Appointment made with the D.O.S. date: ___/___/___ time: _____ venue: _____
- Actions to prove competency: _____ assessed by: _____
_____ assessed by: _____
_____ assessed by: _____
- Supporting documents sighted, copied and attached.
- Units credited or denied
- Approved by D.O.S. Sign: _____ Date: ___/___/___
- Units credited entered in system
- Feedback given to student with transcript if requested- sign acknowledgement Date: ___/___/___
- Report passed to trainer outlining units credited (if applicable)
- Form and documents filed