**MQA/RPL/APF/Ver 1.0**

**RECOGNITION OF PRIOR LEARNING**

**25 October 2019**





**Application Form for Recognition of Prior Learning (RPL)**

1. **Applicant’s Details**

|  |  |
| --- | --- |
| **Full Name** |  |
| **Previous Name (if changed)** |  |
| **Title** |  ⬜ **Ms** ⬜ **Mrs** ⬜ **Mr** |
| **Date of Birth (Day-Month-Year)** |  |
| **Identification Card No.** |  |
| **Nationality** |  |
| **Certificate No. (if naturalised)** |  |
| **E-mail Address** |  |
| **Phone No.** | **Fixed:** | **Mobile:** |
| **Full Postal Address** |  |

1. **Have you previously earned a qualification through RPL?**  ⬜ **Yes** ⬜ **No**

 **If yes, please specify the qualification and year.**

1. **Indicate the field (e.g Travel and Tourism, Construction, Printing, Plumbing) in which you wish to apply for RPL.**
2. **Indicate the number of years of your experience in this specific sector.**
3. **Indicate your preferred language for RPL assessment** (Please tick **☑** as appropriate)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| English Language |  | French Language |  | Creole Language |  |
|  |  |  |  |  |  |

1. **Indicate any qualification acquired.** (Please tick **☑** as appropriate)

|  |  |  |  |
| --- | --- | --- | --- |
| Primary School Achievement Certificate (PSAC) or CPE |  | HSC/ GCE ‘A’ Level/ BAC/ IBAC/ HSC Professional |  |
| National Certificate of Education (NCE) or Form 3 |  | Certificate |  |
| SC / GCE ‘O’ Level |  | Diploma |  |
| Any other qualification, please specify: ................................................................................................................................................................................................................ |

1. **Indicate any training/course followed.**

|  |  |  |
| --- | --- | --- |
| **Training/Course** | **Provider/Institution** | **Date** **From To** |
| . |  |  |

1. **Provide employment details.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Position held** **(as per RPL Field specified)** | **Employer** | **Number of Years** | **Key Responsibilities** |
|  |  |  |  |

This Form together with attachments should be submitted to:

**The Director**

**Mauritius Qualifications Authority**

**Pont Fer**

**Phoenix 73544**

I declare that the particulars provided by me in the Application Form and in the sheets attached thereto are true and correct.

**Name:**............................................................................................................................

**Signature:** …………………………………………. **Date:** ………/ ………/………

**Note:** An application fee of Rs 500/- will be applicable, under the MQA-HRDC RPL Support Scheme, and its payment should be made once your RPL claim has been finalised.