

**Recognition of Prior Learning Application  
CHC30113 Certificate III in Early Childhood Education and Care**

**Acceptable evidence**

- You will be required to complete the RPL Self-Assessment CHC30113 Certificate III in Early Childhood Education and Care;
- Provide Third Party evidence; and
- You will be required to attend and interview with our Lead Assessor

You must leave us with a verified copy that will not be returned to you. 'Verified' means a copy has been:

- signed by a Justice of the Peace or a Commissioner of Declarations who has sighted the original **OR**
- original document is shown to an authorised officer of this organisation who stamps and signs a copy for our records

Please note there are no partial unit RPL's granted.

|                        |  |      |  |
|------------------------|--|------|--|
| Name<br>[Please print] |  |      |  |
| Phone contact          |  |      |  |
| Email contact          |  |      |  |
| Signature              |  | Date |  |

**I am applying for Recognition of Prior Learning for the following units: Please tick the relevant unit seeking RPL for.**

| Code      | Title  | RPL Requested<br><input checked="" type="checkbox"/> tick relevant box |
|-----------|--|--|
| CHCECE009 | Use an approved learning framework to guide practice               | <input type="checkbox"/> Yes <input type="checkbox"/> No               |
| CHCECE003 | Provide care for children  | <input type="checkbox"/> Yes <input type="checkbox"/> No               |
| CHCECE004 | Promote and provide healthy food and drinks                        | <input type="checkbox"/> Yes <input type="checkbox"/> No               |
| CHCECE007 | Develop positive and respectful relationships with children        | <input type="checkbox"/> Yes <input type="checkbox"/> No               |
| CHCECE005 | Provide care for babies and toddlers                               | <input type="checkbox"/> Yes <input type="checkbox"/> No               |
| CHCPRT001 | Identify and respond to children and young people at risk          | <input type="checkbox"/> Yes <input type="checkbox"/> No               |
| CHCLEG001 | Work legally and ethically   | <input type="checkbox"/> Yes <input type="checkbox"/> No               |
| CHCDIV002 | Promote Aboriginal and/or Torres Strait Islander cultural safety   | <input type="checkbox"/> Yes <input type="checkbox"/> No               |
| CHCECE001 | Develop cultural competence  | <input type="checkbox"/> Yes <input type="checkbox"/> No               |
| CHCECE002 | Ensure the health and safety of children                           | <input type="checkbox"/> Yes <input type="checkbox"/> No               |
| CHCECE020 | Establish and implement plans for developing cooperative behaviour | <input type="checkbox"/> Yes <input type="checkbox"/> No               |
| HLTWHS001 | Participate in workplace health and safety                         | <input type="checkbox"/> Yes <input type="checkbox"/> No               |

|  |  |  |
|--|--|--|
| CHCECE011                                | Provide experiences to support children play and learning                | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| CHCECE006                                | Support behaviour of children and young people                           | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| CHCECE010                                | Support the holistic development of children in early childhood          | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| CHCECE013                                | Use information about children to inform practice                        | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| CHCDIV001                                | Work with diverse people   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| HLTAID004                                | Provide an emergency first aid response in an education and care setting | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>Total number of RPL Units granted</b> |  |  |

**Office use only**

| Outcome                       | <input type="checkbox"/> RPL awarded as per above | <input type="checkbox"/> Application unsuccessful |  |
|-------------------------------|---|---|--|
| RTO authorised signature      |   | Date  |  |
| USI Verification Conducted by |   | Date  |  |

[This completed application form and evidence must be filed on learner file. It may be scanned and held electronically.]