



Application for Recognition of Prior Learning

Applying for exemption from: please tick

- 1) Course Attendance
- 2) Exam Completion
- 3) Logging Hours
- 4) Practical Assessment

RPL applied for: (tick one)

LTS Instructor		Todswim Instructor		Ocean Splash Instruc.		Rural Splash instruc.
Coaching level 1		Current Qualification:		SSA ID No:		

First Name:		Surname:	
ID No:		Birth Date:	
		Province & City:	
Contact Details:	©	(h)	(w)
		(fax)	email:
Physical Address:		Postal Address:	
	Code:		Code:

The following must accompany this Application (please tick)

Certified Copy of ID:  Certified Copy of CPR:  Copy of SSA certificate:  if applicable 2 x Color ID Photos:

SSA Reg No: \_\_\_\_\_

Portfolio of Evidence:  YES / NO

Your portfolio of evidence must contain valid information as to your experience in the particular field which you are applying RPL for.

Proof of payment attached:  YES / NO

Official Use: \_\_\_\_\_ Date: \_\_\_\_\_

Received by: \_\_\_\_\_

Approved: \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date of Submission \_\_\_\_\_

Signature: \_\_\_\_\_