## **APPENDIX C: APEL APPLICATION FORM**

Please make sure you have read and fully understood the Student Guidance Notes and spoken to an APEL Adviser **before** completing this form and your portfolio of Evidence. College staff are available to help you.

| PART 1: PERSONAL INFORMATION  |  |  |  |  |
|---|--|--|--|--|
| Surname:  |  |  |  |  |
| Forename(s):  |  |  |  |  |
| Title:  |  |  |  |  |
| Date of Birth:  |  |  |  |  |
| Student ID (if  |  |  |  |  |
| If you have already submitted an Application for full-time study via UCAS, please insert your UCAS number here: |  |  |  |  |
| Contact   |  |  |  |  |
| Details   |  |  |  |  |
| Home  |  |  |  |  |
| Address:  |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
| Telephone   |  |  |  |  |
| Number(s) Home:   |  |  |  |  |
| Work:   |  |  |  |  |
| Mobile  |  |  |  |  |
| Email address:  |  |  |  |  |
| Employer Name and Address:  |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |
|   |  |  |  |  |

| Course Title:             |
|---------------------------|
| Mode of attendance: FT/PT |

| Please tick the level of APEL for which you are applying: |   |  |  |
|---|---|--|--|
| (i)   | Entry   |  |  |
| (ii)  | On-course Exemption – please list the module(s) for which you are seeking exemption.  1. 2. 3. 4. 5. 6. |  |  |
| (iii)   | Both Entry and On-Course Exemption  |  |  |

| PART 3: OUTLINE OF APEL CLAIM          |                       |       |  |  |
|--|-----------------------|-------|--|--|
| I enclose the following documentation: |                       |       |  |  |
| (i)                                    | APEL Application Form |       |  |  |
| (ii)                                   | Portfolio             |       |  |  |
|  |                       |       |  |  |
| Signature                              |                       | Date: |  |  |

• Please return this form and evidence to the APEL Adviser

## Outcome of Claim – Official Use only

## To be completed by APEL Assessment Panel Chair

| Name of Candidate                            | e:  |       |  |        |
|--|---|-------|--|--------|
| Course Applied for                           |   |       |  |        |
| <u> </u>                                     |   |       |  | Please |
| Decision:                                    | Insufficient Evidence – refer back to applicant |       |  |        |
|  | Application approved                            |       |  |        |
|  | Application not approved                        |       |  |        |
| Comments:                                    |   |       |  |        |
|  |   |       |  |        |
| Entry to<br>HE<br>Course                     |   |       |  |        |
| Details of<br>Exemption to<br>be awarded     |   |       |  |        |
| Signature<br>(APEL<br>adviser)               |   |       |  |        |
| Signature<br>(Curriculum<br>Manager)         |   |       |  |        |
| Signature<br>(Quality<br>Representative<br>) |   |       |  |        |
| Outcome reported to candidate Date:          |   | Date: |  |        |
| Information reported to Course Committee     |   | Date: |  |        |

Reference – Version – Status QE0021
Date Agreed at LMT – AFTER Consultation Period (if required)

V3 FINAL

| Decision and Detail Recorded on Database | Date: |
|--|-------|

19th March 2019