



Mutual Recognition Application Form			
NAME (BLOCK LETTERS)			STUDENT NO:
COMPANY:			
ADDRESS			POSTCODE
TELEPHONE	FAX	MOB:	

Course Name:

Units of competency/Mutual Recognition:

Unit Code	Unit Name	Evidence Provided Date	Administration Only M.R Applied Yes/No	Sign

I have read the Mutual Recognition Policy and understand that if this application is successful that I will be given automatic exemption in the relevant units of competency and relevant courses. I understand that I will only receive automatic exemption for these units upon successful submission of statements of attainment for each unit.

I have supplied an original/certified copy of my qualification/statement of attainment for the units I am claiming recognition.

Name: _____

Signed: _____ Date: ____/____/____

Mutual Recognition Application received by:

Name: _____

Signed: _____ Date: ____/____/____



Mutual Recognition Application Form

MUTUAL RECOGNITION CERTIFICATE COMPLIANCE CHECKLIST

Certificate No: _____

Qualification for: _____

SOA for: _____

ROA for: _____

General:

RTO Provider Logo/Name	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
RTO Provider Number	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
TAC Logo	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
NRT Logo	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
CEO Signature	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
Issued Date	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
Certificate Number	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO

Qualification:

This is to certify	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
Qualification Code	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
Qualification Name	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
This qualifies	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO

SOA

This is a statement that...	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
UOC code(s) or name(s)	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
In partial compliment of	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
Qualification name & code	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
This SOA....	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO

ROA

This is a ROA to certify that...	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO
UOC code(s) & name(s)	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO