



## RECOGNITION OF PRIOR LEARNING Testimonial template

### COLLEAGUE / MANAGER TESTIMONIAL ENDORSEMENT

Your Colleague or Manager may use this Testimonial template to support your competency.

A separate Testimonial must be used for each criterion that you want supported.

Please make sure you use appropriate identification on each piece of evidence, including the performance criteria number, so that the assessor can quickly and easily identify them.

*(Please Note: Pieces of evidence that are not identified as supporting a performance criteria will not be assessed.)*

Your employer, workplace supervisor or an industry expert (who you have recently worked with) must complete this page as well as the Testimonial that is attached.

#### Candidate Details

**Candidate Name:** \_\_\_\_\_

**Student Number:** \_\_\_\_\_

#### Manager/Supervisors /Industry Experts Details:

**Manager/Supervisors  
/Industry Experts Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Years working in current  
position:** \_\_\_\_\_

**Relationship to Candidate  
(eg Manager)** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Fax:** \_\_\_\_\_

**Email:** \_\_\_\_\_



<b>Unit of competency</b>	
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**\*\* Please note:** All “Evidence statements” must be demonstrated at the one time, for the competence of the staff member to be deemed satisfactory on each occasion. Please place a tick in the box next to each statement if you have observed the staff member performing each of the tasks described. If all boxes (at the beginning of each statement) have been ticked, then place a tick in the box in column “1”.

Evidence Statement	1
xxx, did the staff member :  <input type="checkbox"/> xxxxx view properties	<input type="checkbox"/>
When xxx, did the staff member :  <input type="checkbox"/> xxxxxxxxxxxxxxxxxxxxxxxxx	<input type="checkbox"/>
In xxxxxxxxxxx, did the staff member:  <input type="checkbox"/> xxxxxxxxxxxxxxxxxxxxxxxxx	<input type="checkbox"/>
When xxxxxxxx, did the staff member:  <input type="checkbox"/> xxxxxxxxxxxxxxxxxxxxycy database / records	<input type="checkbox"/>
In xxxxxxxxxxx, did the staff member:  <input type="checkbox"/> xxxxxxxxxxx	<input type="checkbox"/>
When subxxxxxxxxxxxx sales, did the staff member:  <input type="checkbox"/> xxxxxxxxxxx	<input type="checkbox"/>
In xxxxxxxxxxx, did the staff member:  <input type="checkbox"/> xxxxxxxxxxxxxxxxxxx future contact	<input type="checkbox"/>



## RPL Testimonial template F34\_05 Form

**Supervisor Signature:**

I hereby declare that I have seen (worked with) the Candidate perform in this criterion.  
I believe that the candidate performs to the appropriate industry standard as outlined in this criterion.

**Student Signature:****Date:****Date:**