***Introduction***

This form is to be completed if you have Prior Certificated Learning or Prior Experiential Learning and want this to be considered for credit towards a specific programme of study for which you have made an application.

Please read the *Module Summaries* for the modules for which you are seeking exemption before completing this form.

The Faculty of Education charges a fee of £250 for this profiling service a *Method of Payment* form is included.

***Accreditation of Prior Certificated Learning***

Only qualifications of an equivalent level to the modules for which exemption is sought will be considered. Qualifications will be examined to determine the extent to which they match the level and content of the modules offered on the programme applied for.

***Accreditation of Prior Experiential Learning***

If your non-assessed experience can be evidenced and quantified, this will also be considered towards entry to the programme or towards exemption from modules. Again the evidence of your experience will be examined in order to determine the extent to which it matches the level and content of the modules offered on the programme applied for.

You should only apply for Accreditation of Prior Experiential Learning if you believe you have a ***LEGITIMATE*** claim to credit by virtue of your experience. The assessment of prior experiential learning is an ***EXPENSIVE AND TIME-CONSUMING PROCESS*** and should not be entered into without due consideration.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| A - PERSONAL DETAILS | | | | | | | | | | | | | | |
| **Title *(e.g. Mr, Ms, Mrs etc)*** | | |  | | | | | | | | | | | |
| **Surname/Family Name** | | |  | | | | | | | | | | | |
| **First/Given Name(s)** | | |  | | | | | | | | | | | |
| Address line 1 | | |  | | | | | | | | | | | |
| Address line 2 | | |  | | | | | | | | | | | |
| **Address line 3** | | |  | | | | | | | | | | | |
| **Address line 4 (Country)** | | |  | | **Post Code (UK only)** | | | | | |  | | | |
| **Home Tel:** |  | | | | | **Mobile Tel:** | | |  | | | | | |
| **Fax:** |  | | | | | **E-mail:** | | |  | | | | | |
| **B – PROGRAMME FOR WHICH YOU WISH TO APPLY** | | | | | | | | | | | | | | |
| Please tick one box only | | | | | | | | | | | | | | |
| Master of Arts in Education (Dance Teaching) (2 years part-time) | | | | | | | | | | | | |  | |
| Postgraduate Diploma (Dance Teaching) (1 year part-time) | | | | | | | | | | | | |  | |
|  | | | | | | | | | | | | |  | |
| BA (Hons) Dance Education (6 years part-time) | | | | | | | | | | | | |  | |
| BA (Hons) Dance Education (3 years full-time) | | | | | | | | | | | | |  | |
| Diploma of Higher Education: Dance Education (4 years part-time) | | | | | | | | | | | | |  | |
| Diploma of Higher Education: Dance Education (2 years full-time) | | | | | | | | | | | | |  | |
| Certificate of Higher Education: Dance Education (2 years part-time) | | | | | | | | | | | | |  | |
| Certificate of Higher Education: Dance Education (1 year full-time) | | | | | | | | | | | | |  | |
| BA (Hons) Ballet Education (3 years full-time) | | | | | | | | | | | | |  | |
|  | | | | | | | | | | | | |  | |
| Diploma in Dance Teaching Studies (2 years part-time) | | | | | | | | | | | | |  | |
| Certificate in Ballet Teaching Studies (2 years part-time) | | | | | | | | | | | | |  | |
| Please indicate your intended enrolment date | | | | | | | | | | | | | | |
| Month: |  | | | | | | Year: | | | | |  | | |
| ***Please indicate if your claim is for Accreditation of Prior Certificated Learning (APCL) or Prior Experiential Learning (APEL).*** | | | | | | | | | | | | | | |
| APCL | |  | | APEL | | | |  | | APCL and APEL | | | |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **C – ASSESSMENT OF PRIOR LEARNING** | | | | | |
| Please copy this page as required | | | | | |
| *If you believe the assessed and certificated learning you have gives you eligibility for exemption from a specific module or modules, please provide the information detailed below:* | | | | | |
| Award given (e.g. HND, BA, Certificate of Higher Education) | | | |  | |
| Awarding Body (e.g. RSA, City and Guilds) | | | |  | |
| Total amount of study hours | | | |  | |
| Title of Course | | | |  | |
| Start Date |  | End Date |  | | Part-time/Full-time |
| ***Please provide the following details about the assessments taken:*** | | | | | |
| ***Assessment Title*** | | ***Type of Assessment*** | | | ***Grade Achieved*** |
| *e.g. Dance History* | | *Project* | | | *C+* |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
| ***You are required to attach a full syllabus for the work you have listed above and provide an original transcript from the awarding institution together with the original Certificate.*** | | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| ***Which modules are you applying for exemption from?*** | | | | | |
| ***Module Title and code*** | | ***Level*** | | | ***Credit Value*** |
| *e.g. The Healthy Dancer* DE402 | | *4* | | | *30* |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
|  | |  | | |  |
| ***Briefly explain the reasons why you believe you should be awarded an exemption in the module(s) specified:*** | | | | | |
|  | | | | | |
|  | | | | | |
|  | | | | | |
|  | | | | | |
|  | | | | | |
|  | | | | | |
|  | | | | | |
|  | | | | | |
| **Declaration:** I confirm that the information given on this form is true, complete and accurate and no information requested or other material information has been omitted. | | | | | |
| **Applicant’s Signature:** |  | | **Date:** |  | |
| **Return completed form to:** Registrar, Faculty of Education, Royal Academy of Dance, 36 Battersea Square, LONDON, SW11 3RA | | | | | |

|  |  |  |
| --- | --- | --- |
| **D – ASSESSMENT OF PRIOR EXPERIENTIAL LEARNING** | | |
| You should only complete this section of the form if you believe you have a ***LEGITIMATE*** claim to credit by virtue of your experience. The assessment of Prior Experiential Learning is an ***EXPENSIVE AND TIME-CONSUMING PROCESS*** and should not be entered into without due consideration. ***COMPLETION OF THIS SECTION OF THE APPLICATION FORM IS ONLY THE FIRST STEP IN THE APEL PROCESS.*** You may also be required to complete an assignment and/or be interviewed. | | |
| *Please indicate here any non-certificated learning for which you wish to claim credit.* | | |
| ***Which modules are you applying for exemption from?*** | | |
| ***Module Title and code*** | ***Level*** | ***Credit Value*** |
| *e.g. The Healthy Dancer DE402* | *4* | *30* |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| ***Briefly explain the reasons why you believe you should be awarded exemption for the module(s) listed above. Ensure that you have considered the Module Summaries for the modules for which you seek exemption.*** | | |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |
|  | | |

|  |  |
| --- | --- |
| ***Briefly explain any experience you have had in employment and relate it to the Module Summaries for the modules for which you seek exemption:*** | |
| ***Employment Experience*** | ***Date of Experience*** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| ***Briefly explain any relevant experience you have had in education and relate it to the Module Summaries for the modules for which you seek exemption:*** | |
| ***Educational Experience*** | ***Date of Experience*** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| ***List any non-academic qualifications currently held and relate them to the Module Summaries for the modules for which you seek exemption:*** | |
| ***Title of qualification*** | ***Date Award Received*** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| ***List any other relevant training received and relate it to the Module Summaries for the modules for which you seek exemption:*** | |
| ***Training received*** | ***Date of training*** |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| ***List any current memberships held with relevant professional organisations:*** | | | | |
| ***Professional Organisation*** | | ***Date from which you have been a member*** | | |
|  | |  | | |
|  | |  | | |
|  | |  | | |
|  | |  | | |
|  | |  | | |
| ***Describe any other experiences which would have given you some knowledge, skills or information and relate this to the Module Summaries for the modules for which you seek exemption:*** | | | | |
| ***Experience*** | | ***Date of Experience*** | | |
|  | |  | | |
|  | |  | | |
|  | |  | | |
|  | |  | | |
|  | |  | | |
| ***If you have any evidence that relates to your experience, for example contracts, certificates, lesson plans etc you should provide copies.*** | | | | |
| **Declaration:** I confirm that the information given on this form is true, complete and accurate and no information requested or other material information has been omitted. | | | | |
| **Applicant’s Signature:** |  | | **Date:** |  |
| **Return completed form to:** Registrar, Faculty of Education, Royal Academy of Dance, 36 Battersea Square, LONDON, SW11 3RA | | | | |