**Application for recognition of equivalent learning**

Please complete the following application and lodge, with the necessary documentation. The application is required as a means of assessing the recognition for prior learning for your required accreditation status in Lutheran schools. I am applying for (please tick)

 Accreditation as a Christian Studies teacher (*Ac*)

 Accreditation as a leader (*Al*)

 Accreditation as a Christian Studies teacher and leader (*Acl*)

**Personal details**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

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

**Summary of employment history**

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**Formal qualifications (including any relevant partially completed degrees)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Course name and or Unit name | Institution(including ALC) | Year unit completed | Unit credit points | **Office use**Credit |
|  |  |  |  |  |
|  |  |  |  |  |
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Please attach transcripts and subject descriptors.

Please provide comment and evidence about the content with which you believe your prior learning has provided equivalency. (eg, unit outlines including learning objectives and assessment tasks)

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**Other relevant information**

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* **Attach supporting documentation as relevant**

**Applicant declaration**

* I declare that to the best of my knowledge, the information supplied herein is correct and complete and that the documentary evidence supporting this application is authentic.
* I acknowledge that submitted documents will not be returned to me.
* I authorise LEA to investigate the legitimacy of the documentation I have provided.
* Please keep a copy of this application and supporting documentation for your records.

Signature**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This form is accompanied by supporting documentation and must be submitted to the LEA office (lea@lutheran.edu.au) so that it can be considered by the LEA Accreditation Working Party.

**Submission checklist**

* completed *Recognition of equivalent learning* application form
* related academic transcripts
* relevant unit outlines and assessment tasks, ie,
	+ relevant units for *Al* will include leadership theory and practice
	+ relevant units for *Ac* will include biblical and/or theological study and pedagogy/curriculum