**APL Application Form for entry with advanced standing (form 3)**

Before completing this form you should discuss your application with the relevant academic for your programme and the APL Assessor for your subject area. If you are unsure who this is, contact Admissions or Academic Registry. This form should only be used for applications based on previous study at another higher education provider.

You should obtain details of the Learning Outcomes of the progamme level (level 4, 5, etc) from which you are seeking exemption. These will need to be mapped against the Learning Outcomes of the module(s) or programme level you studied at your previous institution.

**You should only complete this form if you are applying for exemption from an entire level/year of a programme based on a prior certificated learning (study at a previous higher education institution). If you are applying from exemption from a module(s) or on the basis of prior experiential learning (work experience, for example) you should complete the APCL or APEL Application form.**

# Applicant Information

|  |  |
| --- | --- |
| **Surname:** |  |
| **First name:** |  |
| **Bucks or UCAS ID:** |  |
| **Contact email address:** |  |

# Course details

|  |  |
| --- | --- |
| **Course title:** |  |
| **Proposed year of entry (Year 2, 3 etc):** |  |
| **Academic Level (5, 6, 7):** |  |

# Application details

|  |  |
| --- | --- |
| **Total value of credits applied for:** |  |
| **Academic Level (4, 5, 6, 7) of credits applied for:** |  |

|  |
| --- |
| **Evidence supplied****List all of the evidence you have supplied. It is your responsibility to ensure that the evidence provided is relevant. Examples of appropriate evidence include transcripts or a certificate from a previous institution. If you are unsure of what to provide please liaise with the academic supporting your application.**  |
| **1** |  |  |
| **2** |  |  |
| **3** |  |  |
| **4** |  |  |

# Mapping of programme learning outcomes

You must map the Programme Learning Outcomes from your previous institution against the Bucks Programme Learning Outcomes for the Level from which you are requesting an exemption. If these are unavailable, you should map the Module Learning Outcomes.

It is strongly recommended that you seek guidance from an APL Assessor when completing this section of the form.

|  |  |  |
| --- | --- | --- |
|  | **Bucks programme from which exemption is sought** | **Course previously studied** |
| **Course title** |  |  |
| **Place completed** |  |  |
| **Date completed** |  |  |
| **Credit value** |  |  |
| **Academic Level** |  |  |
| **Module Aim** |  |  |
| **Programme Learning outcomes (for the Level from which exemption is requested)** | **1.****2.****3.****4.****5.** | **1.****2.****3.****4.****5.** |
| **Comments** |  |  |

# Additional information (to be completed by the applicant)

|  |
| --- |
| **Please explain why you are making this application and provide any other information that will support your application:** |
|  |

**I confirm that the information given above is accurate:**

|  |  |
| --- | --- |
| **Applicant (signature)** |  |
| **Date** |  |

**To be completed by Bucks New University:**

# Application Appraisal – to be completed by the APL Assessor for the School

You do not need to complete both tables below.

You should complete the Declaration if the application meets the criteria for entry with advanced standing or specific APCL module exemptions stated in the course Programme Specification / Group Directive / Articulation Agreement and does not need additional consideration by the APL Panel.

If it does not meet this criteria, you should complete the Recommendation below before the application is referred to the APL Panel.

Applications that do not need additional approval by the APL Panel must still be reported to the APL Panel.

# APL Assessor Approval (if allowed to be given without consideration by the APL Panel)

|  |  |
| --- | --- |
| **Declaration** | **I confirm that this application meets the criteria outlined in the Programme Specification / Articulation Agreement / Group Directive\* under which this application can be accepted without further approval by the APL Panel****\*please delete as appropriate** |
| **APL Assessor Name** |  |
| **Date** |  |

# APL Assessor Recommendation (for applications that must go to the APL Panel)

|  |  |  |
| --- | --- | --- |
|  |  **YES (add comments if required)** |  **NO (please add comments explaining your recommendation)** |
| **APL Assessor Name** |  |
| **Do you recommend the APL Panel accept this application?** |  |  |
| **Have you seen evidence of the learning?** |  |  |
| **Date** |  |

# For Academic Registry:

|  |  |
| --- | --- |
| **Date received:** |  |
| **Date of Panel:**  |  |

# APL Panel application decision

|  |  |  |  |
| --- | --- | --- | --- |
| **Approved or reported to the Panel?** | **Yes** | **No (add comments if needed)** | **Panel date** |
|  |  |  |  |