

Leading the trading standards profession

Qualification Framework Assessment of Prior Learning

Candidate Prior Learning Submission Form

Candidate Information							
Online APL Registi	ration completed						
Full Name:	Last	First					
Mobile Number:		Email:					
		Exemptions being claimed					
Please indicate be	low which exemptions	you want to gain recognition in via the prior learning	process.				
	STAGE 1						
		E	Exemption				
	Unit 1	Regulatory Environment & Enforcement					
	Unit 2	Business & Consumer Legal Frameworks					
	Unit 3	Trading Standards Law Part 1					
	STAGE 2						
	Unit 4	Weights & Measures written / practical / oral only					
	Unit 4	Food Standards written / oral only					
	Unit 4	Feed written / oral only					
	Unit 4	Product Safety					
	Unit 5	Investigations					
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Please note: if claiming for a Practical/Oral assessment, ensure you have made it clear on your application.

Personal Data

The Chartered Trading Standards Institute (CTSI) will use any personal data supplied by candidates or their employers solely for the purpose of the Qualification Framework registration and qualifications.

Personal data will only be retained and shared within the CTSI group of companies, and any of our suppliers as appropriate, in fulfilling CTSI's obligation of providing those qualifications services and complying with any financial and regulatory requirements.

Your personal data will be processed in compliance with data protection legislation. For more details, please visit our data protection polices and your rights page at: https://www.tradingstandards.uk/about-ctsi/data-protection or email dataprotection@tsi.org.uk.

Further Communication

From time to time we would like to contact you (or your organisation) via email with further and future developments within the qualification. If you would not like to be contacted regarding this please email the qualification team: qualifications@tsi.org.uk

Disclaimer and Signature

PLEASE NOTE: Candidates are responsible for updating CTSI in writing of any change to personal details. Incorrect information may lead to a delay in receiving results.

On signing this document, you are agreeing to the CTSI Professional Competency Framework regulations. A copy can be found on our website:

Signature:	Date:	
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Office Use: Detach sheet from application

Submission information

Evidence reference form Candidate No _____ Full Name: Section to be filled out by Candidate **Section Completed by Reviewer** Evidence Inc. Met Learning Evidence Subject Learning outcome Outcome? Yes/No Yes/No No. Reviewer to complete: The candidate has not met the evidential requirements. Signature: Dated: 2nd Reviewer to complete (if required): I confirm that the candidate has proven they have kept their knowledge up to date. Signature: _____ The candidate has not met the evidential requirements. Signature: _____ Dated: ____