

APPLICATION FORM in view of

RECOGNITION OF PRIOR CERTIFIED LEARNING [RPCL]

*Note: This application refers to the process outlined in Policy Doc 360 Recognition of Prior Certified Learning (PRCL) Policy for Exemptions*

SECTION 1: Details of Applicant

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| --- | --- |
| Applicant’s Name: |  |
| Applicant’s Surname: |  |
| ID Number (or Passport Number in case of international applicants without Maltese ID Doc): |  |
| Contact Address (in full including Locality): |  |
| Country: |  |
| Contact Phone Number (s) (including Mobile number / Landline - (with country’s prefix in case of Non-Maltese contact numbers): |  |
| Applicant’s Email address: |  |
| Full Title (and Code) of MCAST Qualification for which a request is being submitted for RPCL Exemptions from some of its credits: |  |

SECTION 2: MCAST UNIT/S from which Applicant is Requesting Exemption from through RPCL

*This Section refers to the Unit/s forming part of the MCAST Qualification, and which applicant is requesting consideration for Exemption from (in line with the MCAST RPCL Policy and Procedure). Further details*

* *may be accessed from MCAST Website (*[*https://www.mcast.edu.mt/full-time-programmes/*](https://www.mcast.edu.mt/full-time-programmes/)*) by opening the Course Specification document for the respective Course you are interested in being considered for*

*or else, as may be required, applicant*

* *may wish to get in touch directly with the respective MCAST Institute in which the MCAST Qualification is being offered … that way applicant may ask for the information being requested in this section*

*List of Units (official titles), an exemption from which is being requested – please fill in the information in different rows – one row per unit request being submitted.*

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| --- | --- | --- | --- | --- | --- |
| MCAST  Unit Code | MCAST Unit Title (official ... as taken from Course’s Spec) | Unit’s MQF Level | Unit’s Credits (ECTS / ECVET) |  | |
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*For each of the above listed Units (official titles), in the following section kindly insert the learning outcomes for each MCAST Unit you are requesting consideration for RPCL. As explained earlier on, such information can be taken from the MCAST website. Exemption from Units can be considered if there is full coverage of Learning Outcomes (LOs), between the LOs covered by applicant in another Non-MCAST qualification as mapped against the LOs of MCAST Unit/s one would want to request exemption from.*

*In this part of the Request form, only fill in the parts required – according to the number of Units you are requesting an exemption for (leaving the other parts blank, whilst moving to the Section 3 of this form).*

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| --- | --- | --- | --- |
| MCAST Unit TITLE  (for which exemption is requested – as per list presented above) | Learning Outcomes of MCAST Unit (as retrieved from respective Course Specifications, on MCAST website)  Insert ALL Learning outcomes pertaining to SAME unit Title, *in same cell* |  | |
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SECTION 3: Details of Prior Certified Learning

*This Section refers to the Qualification applicant already possesses after having achieved it from another Institution (which is not MCAST)*

*Important: A full authentic scan of the Qualification certificate and any accompanying Transcript or Diploma / Degree Supplement, or similar, are to be made available as properly labelled attachments when submitting this Request form. A Course Specification on official letterhead or an official Institution URL from where the information in this section is being reproduced, are also to be made available.*

*Without these documentary evidence, the request cannot be processed.*

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| Official full title of Qualification, course, and / or Training being presented as basis for RPCL consideration |  |
| Full name of Institution / Awarding Body together with Country of origin |  |
| EQF / MQF level of study |  |
| START Date of Qualification |  |
| END Date of Qualification |  |
| Has this qualification / course been completed in full (Yes or No - in case of No, please explain achievement): |  |
| Briefly (and in generic terms) explain how the Skills, Knowledge and Competencies / Outcomes gained from this Qualification / Course / Training, can be related to the MCAST Programme of Study you would like to be considered for exemptions from (following successful Admissions to same). |  |

*In relation to the list of Units presented at beginning Section 2 of this form, in the next part please present details of the Unit/s from the Non-MCAST qualification you have achieved and how this maps out against the MCAST Unit/s you would like to be considered for an exemption*

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| --- | --- | --- | --- | --- | --- |
| MCAST  Unit Title (you would like to be exempted from) | Unit Title successfully acheived from *Other Institution / Awarding Body* which you would like to use as basis for the requsted exemption. In same cell also reproduce the Learning Outcomes of this same unit you have already achieved through another awarding body | Unit’s EQF/MQF Level  (of unit achieved from other Awarding Body) | Unit’s Credits (ECTS / ECVET)  (of unit achieved from other Awarding Body) | Number of Guided Learning Hours  (of unit achieved from other Awarding Body) |  |
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*Note regarding Data Handling and Data Protection.*

Before you proceed with submitting this RPCL Request Form, please double check to confirm the details you will be submitting.

The personal information provided in this application form shall be processed in accordance with the provisions of the Data Protection Act (Chapter 586 of the Laws of Malta) and the General Data Protection Regulation (GDPR) and for the purpose(s) of your studies (or possible studies) at MCAST  
The processing is based on the necessity of this data.  
  
Your personal information will not be disclosed to any third parties unless strictly required by law.  
The Data Protection Officer’s contact details are [dpo@mcast.edu.mt](mailto:dpo@mcast.edu.mt) .  
  
You have the right to request access to your personal data as well as the right to rectify and where applicable, erase any inaccurate, incomplete or immaterial personal data; to request restriction of processing, to object to processing and to request data portability for the data held by MCAST.  
If you consider that the processing of your personal data is carried out in an unlawful manner, you may lodge a complaint with the Information and Data Protection Commissioner.  
  
The retention period of the personal data you provided in this application is as laid out in the MCAST Data Retention and Destruction Policy, which can be obtained from <https://www.mcast.edu.mt/data-protection-documents/>.   
  
You can withdraw your consent at any time by sending a request to the MCAST Data Protection Officer on [dpo@mcast.edu.mt](mailto:dpo@mcast.edu.mt). This right only applies for personal data collected based on a consent only.

*On completion of Application, kindly fill in this last section - and sign accordingly – as a matter of confirming that all details filled in this form and any scans of documentation provided are true and correct*

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| --- | --- |
| Name and Surname of Applicant |  |
| Applicant’s ID Number (or Passport Number in case of international applicants without Maltese ID Doc): |  |
| Applicant’s Signature |  |
| Date in which Applicant has filled in this RPCL Request form, intended for submission |  |