

## Claim Form for APL within NIPQ Framework



(please refer to the *Guiding Principles and Arrangements for Accreditation of Prior Learning within the NI PQ Framework, NIPQETP, October 2007* and *Guidance Notes for Candidates Making an APL Claim, October 2007*, before completing this form)

### Section One (to be completed by all candidates)

Candidate Name (in full):

PQID No:

Employer:

Job Role:

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### Section Two (to be completed by candidates making an APEL claim, i.e. accreditation of prior *experiential* learning)

Please identify within which Award you wish to seek accreditation:

NI Specific Award in Social Work	
NI Specialist Award in Social Work	
NI Leadership & Strategic Award in Social Work	

Please identify which Requirements you are claiming:

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Do you have existing Requirements within the NI PQ Framework? Yes/No  
If yes, please specify along with corresponding Award:

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What presentation format do you wish to use?

(see *Guiding Principles and Arrangements for Accreditation of Prior Learning within the NI PQ Framework, NIPQETP, October 2007, p11, point 17*)

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What is the focus of the APEL work you are submitting? (e.g. mental health, child care, education and training, management)

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**Section Three (to be completed by those candidates making an APCL claim, i.e. accreditation of prior *certificated* learning)**

Please identify within which Award you wish to seek accreditation :

NI Specific Award in Social Work
NI Specialist Award in Social Work
NI Leadership & Strategic Award in Social Work

Please identify which Requirements you are claiming:

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Name of Certificated Programme of Study Undertaken:

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Focus of Programme of Study (e.g. mental health, management, research)

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Academic Institution (or other) in which Programme was undertaken:

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Duration of Certificated Programme:

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Completion Date:

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Academic Level of Certificated Programme:

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Awarding Body/Bodies:

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What presentation format do you wish to use?

*(see Guiding Principles and Arrangements for Accreditation of Prior Learning within the NI PQ Framework, NIPQETP, October 2007, p11, point 17)*

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What Evidence are you Submitting to Support your Claim?

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**Section Four: Signatures (to be completed by all candidates)**

Signed: \_\_\_\_\_ (candidate)

\_\_\_\_\_ (line manager)

\_\_\_\_\_ (date)



