

CENTRE FOR OCCUPATIONAL HEALTH AND SAFETY TRAINING (COHST)
**Recognition of Prior Learning (RPL) &
 Recognition of Current Competencies (RCC)
 Application Form**



Student's Name Student No.

UNIT: BSBRSK501A Manage risk

Unit Structure: This unit describes the performance outcomes, skills and knowledge required to manage risks in a range of contexts across the organisation or for a specific business unit or area.

This unit addresses the management of the risk across the organisation or within a business unit or area. It does not assume any given industry setting.

This unit applies to individuals who are working in positions of authority and are approved to implement change across the organisation, business unit, program or project area. They may or may not have responsibility for directly supervising others.

If you can answer yes to all the performance criteria below for this unit then you might be eligible for RPL/RCC.

Note: RPL/RCC can only be granted for whole units (Please note that some assignments have multiple units, so you might have to complete part of an assignment which contains units you have not received RPL for)

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Nominal hours for this unit

Element 1		Establish risk context	Assessor OFFICE USE ONLY	
	Performance Criteria	List the evidence to support your claim	Sufficient	Further evidence required
1.1	Review organisational processes, procedures and requirements for undertaking <i>risk</i> management			
1.2	Determine <i>scope</i> for risk management process			
1.3	Identify internal and external stakeholders and their issues			
1.4	Review political, economic, social, legal, technological and policy context			
1.5	Review strengths and weaknesses of existing arrangements			
1.6	Document critical success factors, goals or objectives for area included in scope			
1.7	Obtain support for risk management activities			

1.8	Communicate with <i>relevant parties</i> about the risk management process and invite participation			
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Element 2		Identify risks	Assessor OFFICE USE ONLY	
	Performance Criteria	List the evidence to support your claim	Sufficient	Further evidence required
2.1	Invite relevant parties to assist in the identification of risks			
2.2	Research risks that may apply to scope			
2.3	Use <i>tools and techniques</i> to generate a list of risks that apply to the scope, in consultation with relevant parties			

Element 3		Analyse risks	Assessor OFFICE USE ONLY	
	Performance Criteria	List the evidence to support your claim	Sufficient	Further evidence required
3.1	Assess <i>likelihood</i> of risks occurring			
3.2	Assess <i>impact or consequence</i> if risks occur			
3.3	Evaluate and prioritise risks for treatment			

Element 4		Select and implement treatments	Assessor OFFICE USE ONLY	
	Performance Criteria	List the evidence to support your claim	Sufficient	Further evidence required
4.1	Determine and select most appropriate <i>options</i> for treating risks			
4.2	Develop an <i>action plan</i> for implementing risk treatment			
4.3	Communicate risk management processes to relevant parties			
4.4	Ensure all documentation is in order and appropriately stored			
4.5	Implement and monitor action plan			
4.6	Evaluate risk management process			

APPLICANTS PLEASE CHECK:

- That you have ticked off each element and performance criterias for this unit
- Written in each element **HOW YOU HAVE GAINED THAT EXPERIENCE**
- Attached evidence summary sheet
- Attached evidence to support your claim for each element (including 3 examples of your work)
- Ensured that any qualification transcripts have been certified

UNIT: BSBR501A Manage Risk

Element	Element	√ RPL/RCC CLAIM	√Attach supporting evidence
1	Establish risk context	<input type="checkbox"/>	<input type="checkbox"/>
2	Identify risks	<input type="checkbox"/>	<input type="checkbox"/>
3	Analyse risks	<input type="checkbox"/>	<input type="checkbox"/>
4	Select and implement treatments	<input type="checkbox"/>	<input type="checkbox"/>

NEXT

Complete the **RPL Tracking Record Form** and **Assessment Outcome Form** on the following pages –

- 1 Write in your details and contact information
- 2 Sign the **RPL Tracking Record Form** and **Assessment Outcome Form** where indicated on both pages.
- 3 Send this completed application form and **ALL EVIDENCE** to :

RPL APPLICATIONS, COHST, Swinburne University, Mail No H71, PO Box 218, Hawthorn, VIC 3122

- Once COHST has received your application for RPL allow up to 5 weeks for RPL to be processed.
- If the COHST assessor is **NOT SATISFIED** with the evidence provided you will be asked, to submit additional information or asked to come in for a **Presentation of Evidence Interview** and be assessed on your claims.
- If COHST finds that your RPL application is correct you will be notified and credited for the unit and will not have to do course work for that unit. Please note that some assignments have multiple units, so you might have to complete part of an assignment which contains units you have not received RPL for.

Student's Name

Student No.

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Assessors Comments (OFFICE USE ONLY)

Element number where Gap Training/Learning is required	Evidence/Training/Learning still required			
Assessor Comments -				
Final student result for the competency (please circle)			RPLC	RPLN
Name of Assessor:				
Signature of Assessor:		Date		

Assessor please note: Sign where indicated on the Tracking and Assessment Outcome forms on the following pages, they will be the only forms forwarded to Swinburne student Administration.

**SWINBURNE**University of Technology
TAFE Division

Year : 2009

RPL/RCC TRACKING RECORD**STUDENT CONTACT DETAILS**

STUDENT SURNAME		FIRST NAME		STUDENT NO.	
ADDRESS					
HOME PHONE			WORK PHONE		
MOBILE					
EMAIL					
OCCUPATION					
EMPLOYER					
DURATION OF EMPLOYMENT					
COURSE CODE					
COURSE NAME					

SELECTED RPL UNITS

UNIT CODE	UNIT TITLE	EVIDENCE GIVEN
BSBR501A	Manage Risk	

PLANNING INTERVIEW**Office Use Only**

DATE		
PLACE		
ASSESSOR		
CONTACT NO.	PH:	MOB.
Other teachers or subject matter experts	Name	Contact

SCHEDULED DATES FOR PRESENTATION OF EVIDENCE INTERVIEW**Office Use Only**

SIGNED BY STUDENT

DATE	

SIGNED BY ASSESSOR

DATE	

RPL/RCC Assessment Outcome

INSTRUCTIONS FOR DEPARTMENT

1. The student must be enrolled in the current year in the subjects listed in this application. Please attach an Amendment to Enrolment if the student is not currently enrolled in all subjects.
2. Please forward this form to TAFE Student Administration for processing.

Student Number:								Date of Birth	
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Student Family Name:		Student Other Names:	
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Course Code :	
Course Title in which RPL is sought:	

ASCOL UNIT CODE	UNIT TITLE	RPL Assessment Granted (RPLC) /Not Granted (RPLN)	TEACHER/ASSESSORS NAME and SIGNATURE
QBSBR501A	Manage Risk		Assessors Name Assessors Signature

Centre Manager's Name	Signature	Date
Student Acknowledgement	Name Signature	Date
Student Administration Entered	Initials	Date

Please return this completed RPL Application Form with your evidence to:
RPL APPLICATIONS, COHST, Swinburne University, Mail No H71, PO Box 218, Hawthorn, VIC 3122