



PORTFOLIO

Application form for assessment of prior and experiential learning

To the Dean /Director of _____ Faculty/ College

APPLICATION

I apply for assessment and accreditation prior learning and work experience in volume of ... CP according to the current application.

STUDY PROGRAMME AND LEVEL:

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I APPLY FOR ACCREDITATION OF NEXT SUBJECTS:

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A – CANDIDATE

FAMILY NAME

SURNAME

Date of birth

Place of birth
(City/ community/ county)

Citizenship

men woman

Address

Index City Phone number

E-mail address:

If working, current (or last) position

Institution (name and address)

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A.1 – CURRICULUM VITAE

A.1.1 – Level of education

(primary, secondary, higher education, academic degree)

A.1.2 – Professional or higher education

Highest diploma/certificate obtained:

Institution:

Qualification obtained:

Year:

A.1.3 – Work experience

Write on the table data about your work experience:

	Institution (name and city)	Starting date (year and month)	Finishing date (year and month)	Position, main responsibilities
1. workplace				
2. workplace				
3. workplace				
4. workplace				
5. workplace				

Add more cells or pages if needed.

B – EDUCATION

B.1 – EDUCATION: GRADUATED SCHOOLS AND DIPLOMAS OBTAINED.

Year	Institution Exact name and address	Diploma or certificate Speciality, Qualification
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/		
/		

Add more cells if needed.

B.2 – STATE EXAMINATIONS, QUALIFICATIONS

Year	Institution Exact name and address	Certificate Subject or professional qualification	Result (score or level/ grade obtained)
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/			
/			

Add more cells or pages if needed.

B.3 – CONTINUING EDUCATION and /or NOT COMPLETED (FINISHED) DEGREE STUDIES

Name of the programme or course	Year	Duration, volume (hours/ CP)	Institution (name and address) Lecturer (name)	Objectives, content, Skills obtained

Add more cells or pages if needed

B.4 – PARTICIPATION ON CONFERENCES, SEMINARS, EXHIBITIONS, TRADE FAIRES, ETC.

Specify your role (keynote speech, report, organising work, participation as audience, etc; skills and experience obtained)

Conference, seminar etc	Organising institution	Year	Your role	Experience obtained

Add more cells or pages if needed

B.5 – PRACTICE /TRAINING PERFORMED IN WORK ENVIRONMENT DURING STUDIES
(fill this page if you have completed practice /training)

NAME OF THE STUDY PROGRAMME OR COURSE during which the practice was performed:

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NAME OF THE PRACTICE /TRAINING:

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INSTITUTION WHERE PRACTICE WAS PERFORMED:

NAME:

VOLUME (NUMBER OF WORKERS):

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FIELD OF OPERATION:

LOCATION (CITY):

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DATES:

OBJECTIVES OF THE PRACTICE /TRAINING:

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CONTENT OF PRACTICE /TRAINING, TASKS COMPLETED:

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YOUR EVALUATION OF PRACTICE /TRAINING:

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ADD DOCUMENTS CERTIFYING PERFORMING OF THE PRACTICE/ TRAINING AFTER THIS SHEET.

Add more pages if needed

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C – WORK EXPERIENCE

C.2 – DETAILED DESCRIPTION OF THE WORKPLACE

Described workplace is (tick a box of suitable variant(s)):

- Current workplace
- Last workplace
- Workplace which is best connected with current application
- Workplace which is best connected with self-evaluation

EXACT POSITION AND MAIN RESPONSIBILITIES (exact name of occupation and job description):

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LEVEL OF THE POSITION, PROFESSION (follow official classification of professions, if possible):

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YEARS WORKING IN THIS POSITION:

Institution, where worked (name, type of company (Ltd., Inc., LLC, ...), size, field of operation, location):

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What are the requirements for your position /occupation?

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C.3 –DESCRIPTION OF THE WORKPLACE/ WORK ENVIRONMENT

C.3.1 – DESCRIBE YOUR WORKPLACE:

(UNIT, where you work or are responsible for)

- Objectives and main tasks of the unit:

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- Cash flow or the budget of the unit:

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- Size of the unit, workgroup, personnel (number of workers, qualification):

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- Means of production:

(Describe means of production or equipment you are using for your work)

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C.3.2 – DESCRIPTION OF WORK:

□ **DELEGATING OF TASKS (SHARING OF RESPONSIBILITY)**

DELINEATE YOUR DECISIONMAKING AREA

- What kind of ordinances you receive? Who is giving them?
- What kind of ordinances you make (give)? Whom you give them?
- Who makes decisions? What kind of decisions you make? Describe what kind of decisions you can make without consulting with superior.
- Are your activities connected with budget, personnel?

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□ **SUPERVISION**

DELINEATE AREA OF YOUR INDEPENDENCE, DEPENDENCY FROM COLLEAGUES AND MANAGEMENT ...

- Whom you report and how often?
- What kind of results is expected from you (outcomes of your work)?

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□ **RELATIONS WITH TARGET GROUPS**

SPECIFY RELATIONSHIPS

- What is the type of work relationships inside the institution and outside of the institution? Describe relations with different partners.
- Who are your main partners outside the institution?
- What are the objectives of the communication?
- Who takes the initiative in the communication?

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C.4 – DETAILED DESCRIPTION OF MAIN ACTIVITIES AND RESPONSIBILITIES

Please describe in detail your activities and responsibilities at your workplace. Show by every activity in row how much time it takes and specify complexity of task or activity.

Add one or two examples for clarification if needed.

ACTIVITY/ TASK	% TIME	LEVEL OF COMPLEXITY 1 - 2 - 3 - 4
1		
2		
3		
4		
5		

Level of complexity:

1 – Implementation of ordinances or procedures

2 – Making solutions or proposals for enhancing or optimisation of the work

3 – Developing of programmes or job descriptions

4 – Determination of orientation or strategy

Add more cells or pages if needed

D – OTHER ACTIVITIES

D.1 – PARTICIPATION IN NGO-S AND OTHER THIRD SECTOR ORGANISATIONS OR CLUBS

Describe your membership in the NGO-s and other third sector organisations and volunteer organisations, your role in the structure of those organisations (member of the board, executive leader, project leader, etc.). Describe skills and competences obtained.

Name of the organisation	Duration of membership	Entity of the organisation (main goal, main activities, number of members etc.)	Your role	Skills, experience and knowledge obtained

Add more cells or pages if needed

D.2 – PARTICIPATION IN REGULAR FREE-TIME ACTIVITIES, HOBBY’S

List the hobby-groups, clubs, hobby-schools where you have participated regularly (sports, music, theatre, dance, technique, etc) and other hobby’s. Describe skills, knowledges and experiences obtained by free-time activities.

Activity	Period	Institution (if any) Name and city /county	Skills, experience and knowledge obtained

Add more cells or pages if needed

D.3 – PARTICIPATION IN PROJECTS AND PROGRAMMES, incl. INTERNATIONAL EXPERIENCE

Describe projects or programmes (incl. international exchange programmes, volunteer work, youth exchange, etc.) where you have participated, your role and skills and knowledge obtained.

I PROJECT

- 1. Name of the Project:**
- 2. Organising institution /organisation:**
- 3. Time and place of the project:**
- 4. Duration:**
- 5. Annotation: objective, activities, target group:**
- 6. Your role in the project:**
- 7. Skills, experience and knowledge obtained:**

II PROJECT

1.-7.

III PROJECT

1.-7.

Add pages if needed.

D.4 – ACTIVITIES IN THE ROLE OF TRAINER, LEADER OR INSTRUCTOR

Describe your activities where you have been in the role of trainer, leader or instructor (clubs, hobby-groups, events, etc.).

Activity	Period	Number of participants

D.5 – PARTICIPATION IN COMPETITIONS AND CONTESTS

Competition, contest, etc.	Organiser (institution)	Time, place	Your result

D.6 – PUBLICATIONS

Refer your articles and other publications (or web-pages) published in scientific or popular-scientific journals, books, internet etc.

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CONFIRMATION

Hereby I confirm that all data in this application is true and correct.

Date:

Signature of applicant:

ANNEXES FOR EVIDENCE MATERIALS

List of documents added to the application:

- Motivation letter, where you detail next issues:
 - Reasons for the application,
 - Study or career plan for the future and objectives claimed,
 - What is the main essence of your prior learning and work experience preparing you for completing the endeavoured studies.

- Document from workplace certifying your work position and main activities

- Copies of the diplomas or certificates (if coming from outside of Estonia, official translation of the documents into English or Estonian, translation certified)

- Transcript of records, descriptions of the programmes, volume of study programmes, if possible

This list is not limited. You may add more documents and evidence materials which are in your opinion useful and necessary for showing your experience.

DECISION OF THE APEL COMMITTEE

APPLICANT: (Name and surname)

POSITIVE ASSESSMENT ABOUT ACCREDITATION OF NEXT SUBJECTS:

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NEGATIVE ASSESSMENT OF NEXT SUBJECTS:

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Recommendations (tasks or subjects to study for getting positive accreditation):

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Date: Signature of the head of the APEL committee:

According to the decision of the APEL committee

DECISION

On the basis of prior learning and work experience to accredit the studies as mentioned above
in the volume credit points, in the curriculum are completed next modules:

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Date: Signature: