AOA Research Requirements: Recognition of Prior Learning (RPL)

Application Form

To be used in combination with the AOA Flexible Training and Research Requirements Policies

For trainees commencing 2017 onwards only

Full name	
SET year or stage of	
training	
Training region (please select)	🗖 NS 🗖 NC 🗖 VIC/TAS 🗖 WA
	ss QLD SA/NT
Research pathway for which exemption is sought	 Project Pathway PhD Pathway Coursework Pathway Part A Coursework Pathway Part B
Course type	 Graduate Certificate Graduate Diploma Masters Degree
Name of course	
Institution details	
Course commencement	
and completion details	
Research project	
or name of study	
undertaken	
Did your project/study	Clinical Epidemiology
include any of the	Biostatistics
following subjects?	Research Methods
Please note: a minimum of	Evidence Based Medicine
2 of these subjects must	
have been completed in	
order to claim RPL.	
Is the study directly	Yes No
relevant to orthopaedic surgery ?	If no, please provide further details of study:

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A U S T R A LIA N ORTHOPAEDIC ASSOCIATION

Publication / presentation details (i.e. level of authorship, journal name and impact factor details, and name/ date of meeting where research was presented).	
Trainee Request for RPL Please describe full details of course completed including type of study undertaken, study design, including your level of involvement in study (& any other relevant details).	

Attachment checklist

The following documents must be provided in order to accompany your request for RPL:

- Course outline, including subjects undertaken
 - Certified copy of evidence of completion of course (i.e. an official academic transcript showing course code, research project title and completion)
- Abstract or summary of research project or copies of assessment outcomes
- Project Supervisor Report/s
- A PubMed citation and link to article, or full citation and ISBN, or letter of acceptable for publication on publisher letterhead (specifying authorship details)
- A meeting program showing meeting name and trainees name printed against presentation title, including date and location OR letter from conference organizer

Trainee Declaration: All information I have provided to support this application is true and correct. I authorise AOA to make any enquiries necessary to assist in the assessment and verification of this application, and to use any information supplied in this application for that purpose.

Trainee name	
Signature	
Date	

