

CREDIT TRANSFER APPLICATION FORM



<u>STUDENT DETAILS</u>	
Student Name:	
Student ID:	
Email:	
Phone:	
Date of Application:	

<u>UNITS FOR WHICH CREDIT TRANSFER IS REQUESTED</u>				
Unit Code	Unit Title	Previous Provider	Qualification Name	Year Completed

REQUIRED EVIDENCE (TICK ATTACHED DOCUMENTS)

- Certified copy of Statement of Attainment
- Certified copy of Qualification Certificate
- Academic Transcript
- USI transcript (if applicable)



Important:

Credit transfer can only be granted for identical unit codes and titles issued by an RTO or AQF qualification.

STUDENT DECLARATION

I declare that:

- The information provided is true and correct.
- The attached documents are certified copies of original documents.
- I understand that credit transfer will only be granted where unit codes and titles are identical.
- I understand that granting credit transfer may affect the duration and fees of my course.

Student Signature:

Date:

OFFICE USE ONLY

VERIFICATION OF DOCUMENTATION

Verified against:

- Original document sighted
- Certified copy accepted
- USI transcript verified

Verified by:

Position:

Date:

ASSESSMENT OUTCOME

Unit Code	Unit Title	Outcome
		<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved

Reason if not approved:

IMPACT ON ENROLMENT

- Training Plan updated
- Fees adjusted (if applicable)
- SMS updated
- Student notified in writing

Processed by:

Position:

Date:

INTERNAL RECORDING

- Credit Transfer recorded in SMS
- Student file updated
- CI register update required (if systemic issue identified)