

## FOR-ENR-11 Credit Transfer Application Form

### Section 1 – Student Details

<b>Student Name:</b>		<b>Student ID:</b>	
<b>Email:</b>			
<b>Contact Number</b>			
<b>Qualification seeking credit:</b>			

### Section 2 – Application and Declaration

**Student:**

I am applying for credit transfer for the units of competency/modules listed below. I have attached copies of documentation from another RTO that I understand the assessor will verify that these documents are true and correct.

I declare the documentation supplied is legitimate, true, and correct.

I understand that all students have a right to appeal and may do so within 10 working days of receipt of my application.

<b>Student Signature:</b>		<b>Date:</b>	
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### Section 3 – Units seeking credit transfer

(this is for units that you have previously completed and can be verified in your attached documentation)

Unit Code	Unit Name	Approved	Refusal

Notes:

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**Admin Use Only****Section 5 – USI Verification process and notes**

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**Section 6 – Assessor Judgement and Declaration**

<b>SMS Result Updated:</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>Date:</b>	/ /	<b>Initial:</b>	
<b>DoHA notified if duration impacted</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>Date:</b>	/ /	<b>Initial:</b>	
<b>Evidence &amp; Form in File:</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>Date:</b>	/ /	<b>Initial:</b>	
<b>Qualification Verified</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>Date:</b>	/ /	<b>Initial:</b>	
<b>Reimbursement Given:</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>Date:</b>	/ /	<b>Initial:</b>	
<b>Student Notified:</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>Date:</b>	/ /	<b>Initial:</b>	
<b>New timetable issued</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<b>Date:</b>	/ /	<b>Initial:</b>	
<input type="checkbox"/> I declare that I have assessed this application and it is true and correct at time of review.						
<b>Assessor Signature:</b>				<b>Date:</b>	/ /	
<b>Deputy Director Signature</b>				<b>Date</b>	/ /	