

Credit Transfer Application



Student Details			
Student Number		Date	
Family Name		Given Name	
Address			
Contact Number			
Email Address			

Course Details				
Qualification				
I am applying for Credit Transfer for the following units of competency:				
Unit Code & Title	Evidence Supplied	Is unit equivalent in TGA	Assessment Outcome	Refund Applicable

Supporting documentation (tick all that apply)
<input type="checkbox"/> Testamur (Certificate) & Record of Results
<input type="checkbox"/> Statement of Attainment

Student Declaration:

- I have read and understand the Recognition Policy and Procedure
- I have read and understand the Fees, Charges and Refund Policy
- I understand that I will not be eligible for a refund if I apply for Credit Transfer after the commencement date for the unit.
- I understand that I will receive a written response with ten (10) business days outlining the college decision upon validation of the documentation I have provided.
- I have provided valid and certified or original documentation.

Student Signature		Date	
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Office Use Only			
Assessing staff member:	Signature:	Date:	
CT Granted: Yes No	Date student informed:		
Financial Credit to be applied: Yes No	Date application sent to Finance:		
Credit applied to Tuition fees: Yes No	Date:	Signature:	
PRISMS Variation Required: Yes No	Date application sent to Admissions:		
Revised CoE Sent to Student: Yes No	Date:	Signature:	