

Credit Transfer Application Form

Student Details			
Student City ID:			
Student Name:			
Contact No.:			
Email:			
USI Number:			
Course Name			
Add Unit Code & Title			
Unit Code		Unit Title	
Unit Code		Unit Title	
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Unit Code		Unit Title	
Unit Code		Unit Title	
Evidence of Supporting documentation (tick all that apply)			
☐	Certificates & Record of Results		
☐	USI Transcript		
☐	Statement of Attainment		
☐	Additional Relevant Documents		
Student Declaration			
■ have read and understand the Credit Transfer Policy and Procedure ■ I understand that I will not be eligible for a credit transfer if I apply after the commencement date for the unit. ■ I understand that I will receive a written response within ten (10) business days outlining the college's decision upon validation of the documentation I have provided. ■ I have provided valid and certified or original documentation			
Student Signature:			
Date:			

Document Name: Credit Transfer Application Form	Reviewed Date: Jul 2026	RTO Code: 91770	CRICOS Code: 04234E
Version: 1.2	Next Review Date: July 2027	Approved by: CEO	Page 1 of 2

Admin use only	
Application is :	☐ Accepted ☐ Declined
Credit Transfer approved:	☐ Yes ☐ No
Comments (if any)	
Approved by:	
Date:	
Signature:	

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