## **Credit Transfer** Application Form





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1. Student& Visit	Detail	s								
Student Name:						Student ID. #:				
Qualification / Course:										
Assessor Name:					Date:			/	/	
2. Application and Declaration										
Student:  I wish to apply for credit transfer for the units of competency/modules listed below.  I have attached original copy of certification documentation from another RTO.  I declare that certification documentation supplied is legitimate, true and correct.  I understand that the Assessor/Training Manager will verify my certification documentation for validity.										
Student Signature:					Date:	Date:		/ /		
3. Units /Modules Outcome										
U-: 0- d-	11.2	Unit Name				Assessor Only				
Unit Code	Unit					Evidence supplied		idence erified	Assessment Outcome	Assessor Initial
4. Assessor/Training Manager Judgement and Declaration										
☐ I have verified and viewed original certification documentation supplied and a copy has been collected from applicant.										
Assessor/Training Manager Signature:							Date:		/ /	
Admin Use Only			□ N	Det	,	/				
SMS Updated :		☐ Yes	∐ No	Date:	/	/		itial:		