

## Credit Transfer Application Form

Student Details	
Student Name:	Student No.:
Qualification/ Course:	
Assessor name:	Date:

Application and Declaration
<input type="checkbox"/> I wish to apply for Credit Transfer for the units of competency/modules listed below.
<input type="checkbox"/> I have attached original copy of certification documentation from another RTO.
<input type="checkbox"/> I declare that certification documentation supplied is legitimate, true and correct.
<input type="checkbox"/> I understand that the Assessor will verify my certification documentation for validity.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Units / Modules Outcome
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Unit Code	Unit Name	For Assessor Use Only			
		Evidence Supplied	Evidence Verified	Assessment Outcome	Assessor Initial
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		
		<input type="checkbox"/>	<input type="checkbox"/>		

Assessor Judgement and Declaration
<input type="checkbox"/> I declare that I have verified certification documentation supplied is legitimate, true and correct.
Assessor Signature: _____ Date: _____

**OFFICE USE ONLY:**

Application Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Student file updated:  Yes  No Date: \_\_\_\_\_ Initial: \_\_\_\_\_