



CREDIT TRANSFER REQUEST FORM

Course code: _____
 Course Name: _____
 Family Name: _____
 Given Name: _____
 Address: _____
 Contact Phone Number/s: _____

Credit transfer applies to situations where the students have completed units: identical and/or equivalent to those they are currently enrolled in, at another TAFE College or Registered Training Organisation. Credit will be granted in accordance with the Credit Transfer Procedure and the student will be notified of the outcome.

Fees and Charges

- Internal credit transfer will be free of charge
- External credit transfer will be charged \$100

Name of Institution: _____
 Name of Qualification: _____

Attachment

Attach one of the following when sending this completed form to the college:

<input type="checkbox"/>	A copy of AQF Qualification
<input type="checkbox"/>	A copy of Statement of Results
<input type="checkbox"/>	A copy of Statement of Attainment
<input type="checkbox"/>	USI Transcript

Competency based on Credit Transfer has been granted for the following Units

Staff Signature _____ Date: _____
 Student Signature _____ Date: _____