

Credit Transfer Application Form

Student Details

Name:	
Date of Birth:	
Date of Application:	

Qualification Details (the course you will be enrolling into):
 Qualification Code:
 Qualification Title:

Assessor Checklist

- The client wishes to apply for credit transfer and/or competencies held are applicable to their intended enrolment.
- Copy of Statement of Attainment from the issuing RTO has been attached and authenticity has been verified.
- If student has a superseded and equivalent unit, the currency of the unit has been validated from training.gov and screen shots have been provided.

Completed Unit Code from Transcript	Unit Code Student is applying for	D- Direct unit S- superseded and equivalent		Evidence Verified
		<input type="checkbox"/> D	<input type="checkbox"/> S	<input type="checkbox"/>
		<input type="checkbox"/> D	<input type="checkbox"/> S	<input type="checkbox"/>
		<input type="checkbox"/> D	<input type="checkbox"/> S	<input type="checkbox"/>
		<input type="checkbox"/> D	<input type="checkbox"/> S	<input type="checkbox"/>
		<input type="checkbox"/> D	<input type="checkbox"/> S	<input type="checkbox"/>
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		<input type="checkbox"/> D	<input type="checkbox"/> S	<input type="checkbox"/>
		<input type="checkbox"/> D	<input type="checkbox"/> S	<input type="checkbox"/>
		<input type="checkbox"/> D	<input type="checkbox"/> S	<input type="checkbox"/>

Assessor Judgement & Declaration

I have verified that certification documentation supplied is legitimate, true and correct and credit should be granted.

Assessor Name:	
Assessor Signature:	
Date:	

ATTACH VERIFIED COPY OF STATEMENT OF ATTAINMENT AND IF REQUIRED SCREEN SHOTS OF SUPERSEDED AND EQUIVALENT EVIDENCE