

# Credit Transfer Application Form



Credit Transfer Application Form					
Section 1 – Client & Visit Details					
Client Name:		Client No.:			
Qualification / Course:					
Assessor Name:		Date:	<input type="checkbox"/>	/	/
Section 2 – Application and Declaration					
<b>Client :</b>					
<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.					
Client Signature:		Date:	<input type="checkbox"/>	/	/
Section 3 – Units /Modules Outcome					
Unit Code	Unit Name	Assessor 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"/>		
Section 4 – Assessor Judgement and Declaration					
<input type="checkbox"/> I declare that if have verified certification documentation supplied is legitimate, true and correct.					
Assessor Signature:		Date:	<input type="checkbox"/>	/	/
Admin Use Only					
SMS Updated :	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date:	/ /	Initial:
Client file updated :	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Date:	/ /	Initial: