

A Credit Transfer application must be accompanied by nationally recognised certificates or statement of attainments indicating the units successfully completed including unit codes, unit name and date of completion as per National Australian Institute of Technology's Course Credit Policy

**STUDENT DETAILS** (Student ID# .....

Student's Given Name:		Student's Surname:	
Address			
Contact Tel #		Date of Birth: (dd/mm/yyyy)	
Email ID:		Gender (Tick box applicable)	Male <input type="checkbox"/> Female <input type="checkbox"/>

**COURSE DETAILS**

Credit Transfer application for: (Course Name)		Course Code	
Course Start Date:		Course End Date	

**UNIT OF COMPETENCY DETAILS**

Please detail Unit (s) of Competency you wish to apply Credit Transfer for. You **MUST** attach certified copies of your original documents to support your application and **also bring the originals to be sighted on the orientation day.** Your application for Credit Transfer will be considered as incomplete and will not be processed if you have not attached the required documents.

Note: Certifications can be conducted by a Pharmacist, at the post office, a Justice of the Peace or a marriage celebrant.

**Student Declaration:**

- I declare that information provided by me is a true and accurate account of my previous studies.
- I understand that if the information provided is incorrect or insufficient my application for credit transfer may be refused.

Student's Signature:..... Date: .....

**STUDENT TO FILL IN THE FOLLOWING (First four columns only)**

RTO NAME (Which issued Statement of Attainment/ Academic Transcript and Testamur)	UNIT CODE	UNIT NAME	DATE OF COMPLETION	APPROVED To be completed by Director Compliance & Training (DCT)	Initials of DCT / Comments
				Yes <input type="checkbox"/> No <input type="checkbox"/>	
				Yes <input type="checkbox"/> No <input type="checkbox"/>	
				Yes <input type="checkbox"/> No <input type="checkbox"/>	
				Yes <input type="checkbox"/> No <input type="checkbox"/>	
				Yes <input type="checkbox"/> No <input type="checkbox"/>	
				Yes <input type="checkbox"/> No <input type="checkbox"/>	
				Yes <input type="checkbox"/> No <input type="checkbox"/>	
				Yes <input type="checkbox"/> No <input type="checkbox"/>	
				Yes <input type="checkbox"/> No <input type="checkbox"/>	
				Yes <input type="checkbox"/> No <input type="checkbox"/>	

Training Manager’s Signature: .....

Date: .....

Once you have submitted your application with the required supporting documentation you will be notified of the outcome of this application within 14 working days.

**Privacy information**

*I understand that National Australian Institute of Technology may distribute my personal details as indicated in the statement:*

*“Information is collected on this form to meet the Institute’s obligations under the ESOS Act and the National Code 2007; to ensure student compliance with the conditions of their visas and their obligations under Australian immigration laws generally. The authority to collect this information is contained in the Education Services for Overseas Students Act 2000, the Education Services for Overseas Students Regulations 2001 and the National Code of Practice for Registration Authorities and Providers of Education and Training to Overseas Students 2007. Information collected about you on this form can be provided, in certain circumstances, to the Australian Government and designated authorities. In other instances information collected on this form or during your enrolment can be disclosed without your consent where authorized or required by law.”*

**FOR OFFICE USE ONLY**

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Original documents sighted on orientation day

Yes

No



Information on this application form has been noted on TEAMS and Student file	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Student advised of the outcome of this application within 14 working days	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Course variation, if required, has been noted on PRISMS	Yes <input type="checkbox"/>	No <input type="checkbox"/>
“Confirming outcome of Credit Application” letter sent to the student	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Received “student declaration”	Yes <input type="checkbox"/>	No <input type="checkbox"/>

**Training Manager’s Signature:** .....

**Date:** .....