

**SECTION 1: Student Details** 

**Student Name:** 

Email:

Contact Number:

## **APPLICATION FOR COURSE CREDIT**

Please complete this form and submit it to a Student Services Officer for processing. Please submit your application with original/certified copies of relevant supporting documentation (certificate, qualification, statement of attainment, academic record etc.) There are no fees charged for granting a credit transfer, however, please remember to notify the College PRIOR to course/unit commencement to request credit transfers, otherwise unit fees may be charged once you have commenced your course.

Credit Transfer (CT): is the granting of credit status by an institution or training organisation to students for units of competency already completed as part of the same or similar qualification (recognised training).

Date:

Student ID:

Date of Birth:

SECTION 2: Course Details					
Course enrolled/enrolling in:			Course Start Date:		
Total number of units requesting credit for:			Course End Date:		
SECTION 3: Credit information					
Qualification /Course	Unit Code	Unit T	itle	Evidence provided	
Student comments:					



## **Student Declaration:**

I wish to apply for Course Credit in the above-mentioned course or unit/s and certify that the information supplied by me including any original/certified supporting documents is to the best of my knowledge true and accurate.

I understand that once course credit has been granted, the duration of my course may be shortened and the college will adjust my fees accordingly.

For Student Visa Holders: I understand that if I apply for course credit after my course has been confirmed, a NEW electronic Confirmation of Enrolment (eCoE) will be issued and the Department of Home Affairs will be notified of any new changes to my course duration.

I understand the changes outlined above, and agree to follow a different course plan as an outcome of Course Credit grant for the above-mentioned course/s or unit/s.

Student Signature:	Date:

SECTION 4: Approval by Training Manager / Course Coordinator / COO				
Sufficient evidence provided: □ YES □ NO	If any units are refused, provide comment below:			
Credit Transfer granted: □ YES □ NO				
Date granted (if yes):	Approved by: (Print Name)			
Approved by: (Title)	Signature:			
Additional comments:				
Total number of units approved for Credit Transfer:				
Total number of units refused for Credit Transfer:				
Total number of units refused for credit mansier.				
Course duration after course credits are granted:				
Course Delivery changes/comments :				
Further actions required: (Note: Students are informed of their rights to access the College's Complaints and Appeals processes within 20 days of receiving the decision in writing for any credit applications refused or to have their grievances heard and addressed).				



Section 5: Office use only (Student Services/Admissions to complete only if credit transfer is granted for one or more units)			
Date received:	Date entered:		
Entered into SMS by:	LMS access updated by:		
Changes entered into PRISMS (if applicable): ☐ YES	Date:		
New eCOE required and issued: ☐ YES ☐ N/A	Date:		

Document Created: February 2024, Student Administration Course Credit/ Version 1.0/0224







