



Credit Transfer Request Form

Surname:	
First Given Name:	
Student ID:	
Date of Application:	
Course applying credit(s) for:	

Unit of competency details:

AVTI units requesting Credit Transfer for:		Previously studied units that you have evidence for:	
<u>Unit code</u>	<u>Unit description</u>	<u>Unit code</u>	<u>Unit description</u>

Decision Outcome: (units credit transfer granted for)

<u>Unit code</u>	<u>Unit description</u>	<u>Unit code</u>	<u>Unit description</u>



By signing this form, I certify that the information provided is true and correct.

Student Signature: _____ **Date:** ____ / ____ / ____

OFFICE USE ONLY

Outcome: Approved Not Approved

Comments:

Processed by:

(Name and Job Title): _____

Signature: _____ **Date:** _____