Student Credit Transfer Application Form



A. STUDENT / COURSE DETAILS		
Student ID:	Course Code:	
Name:	USI No:	
Course:		
Contact Phone:	Email:	
B. PREVIOUS COURSE DETAILS		
Name of the Institute/Provider:		
Course Code & Name:		
Date of Commencement:	Date of Completion (if completed):	
C. UNITS TO BE CREDIT TRANSFERED		

Please tick (\square) below the units you're applying for the grant of credit transfer. Credit transfer will be granted to those units where students have demonstrated a particular competence by successfully completing a unit or units at another RTO, provided the Code and Title of the units are identical. Credit will be granted in accordance with the Credit Transfer Policy.

Please attach all original or certified documentation such as Statement of Results or Official Transcripts with this application.

Unit Code	Unit Name	Grade Achieved

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Unit Code	Unit Name	Grade Achieved	
 □ I declare that the information & documentation given is true and accurate to the best of my knowledge and I have not willfully suppressed any information. □ I understand that if there are any changes to the information provided by me in this form, I would notify RGIT Australia immediately and in the event that I fail to do so, I may be liable for any additional costs incurred. 			
Office Use On	ly		
Received by _	Signature	Date	
Document	ts verified Processed. Date Pend	ding	
Others	Contact sheet updated		

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