



Credit Transfer Application

To be filled out by the student and submitted to SITS College office via email or post or in person.

Student's Details	
Family Name	
Given Name	
Email	
Address	
Contact No .	

Please provide the information regarding course for which you require to have the credit transfer:

Unit Code	Unit Name

Information related to credit transfer:

- ▶ For application to be processed further, the students need to provide the Statement of Attainment or Record of Results or transcript or some other document as an evidence of completion of the unit(s), issued by a registered training Organisation in Australia.
- ▶ Student must fill in the Credit Transfer application form.
- ▶ If the application gets approved, the length of the course will be shortened accordingly.
- ▶ The student will be communicated the outcome of the application promptly.

Privacy Statement:

SITS College stores and uses personal information only for the purposes of administering student enrolment and education. The information collected is confidential and will not be disclosed to third parties without student's consent, except to meet government, legal or other regulatory authority requirements. The information collected in this form is just to meet the compliance requirements and obligations. It must be noted by the Student that the information collected during the enrolment process and in this form can be provided to Australian government and the designated authorities in certain circumstances. Under the Privacy Act 1988, Students can access their personal information held on them and they may request corrections to information that is incorrect or out of date.

Student Declaration:

I declare that I wish to apply for course credit as outlined in this form. I have been communicated all the information in regards to course credit. The attachment with this form is the soft/hard copy form of my original academic document. All the information provided in the form is correct and complete.

Student Name

Date

Student Signature



Level 6, 269 Wickham Street, Fortitude Valley QLD 4006



www.sits.edu.au



1300 467 487



info@sits.edu.au



Office use only: Credit Transfer Application outcome

Credit Transfer Approved?

YES

NO

If No, please provide the reason:

Please provide the details of credit transfer

Name of Unit	Code of Unit	Decision of Assessor (Approved or not approved)	Assessor's Initials

Effects of credit transfer

- ▶ Recommended reduction of _____ weeks/months from the proposed course duration.
- ▶ Change in timetable / training plan.

Checklist for finalising the Credit Transfer Application:

- ▶ Has the Student been notified of the changes as result of credit transfer?
- ▶ Has it been updated on Student Management System?
- ▶ Please file this document along with the application in student file.

Comments if any:

Student Declaration:

I declare that I have been communicated the outcome of the Credit Transfer Application and I am satisfied with the outcome.

Student Name Student Signature Date

Staff name Designation

Staff Signature Date