Credit Transfer Application Form



Section 1 – Client & Visit Details												
Client Name:							Client No.:					
Qualification / Course:												
Assessor Name:				Date:	/	/						
Section 2 – Application and Declaration												
Client:												
☐ I wish to apply for credit transfer for the units of competency/modules listed below.												
☐ I have attached original copy of certification documentation from another RTO.												
I declare that certification documentation supplied is legitimate, true and correct.												
I understand that the Assessor will verify my certification documentation for validity.												
Client Signature:						Date:	/	/	,			
Section 3 – Units /Modules Outcome												
							Assessor Only					
Unit Code Unit Name							Evidence supplied	Evidence Verified		ssment tcome	Assessor Initial	
Section 4 – Assessor Judgement and Declaration												
I declare that I have verified certification documentation supplied, is legitimate, true and correct.												
Assessor Name (Print):					Assessor Signature:				Date:			
										/	/	
Admin Use Only												
SMS Updated : Yes			☐ No	Date: /			/	Initia	Initial:			
Client file updated:		Yes No)	Date:	/	/	Initia	Initial:			

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