Application for Credit Transfer

Student Number: _____

Family Name: _____ **First Name:** _____

Telephone Number: _____ **Email Address:** _____

Information and Instructions

VACTS recognises qualifications issued under the Australian Qualifications Framework and Statements of Attainment issued by other Registered Training Organisations. To be considered for credit transfers (national recognition), you must complete this application form and submit it along with relevant statements of attainment. You must allow ten working days for your application for credit transfer (national recognition) to be processed.

From which RTO(s) do you have a statement of attainment? _____

For which VACTS program are you applying for credit transfers? _____

You must complete the table below, providing information about units of competency for which you wish to apply for credit transfer.

Unit Code	Unit Name	**VACTS TO COMPLETE** Signature of authorised staff member		
		Recommended (signature)	Yes	No

Unit Code	Unit Name	VACTS TO COMPLETE Signature of authorised staff member		
		Recommended (signature)	Yes	No

Unit Code	Unit Name	VACTS TO COMPLETE Signature of authorised staff member		
		Recommended (signature)	Yes	No

Unit Code	Unit Name	VACTS TO COMPLETE Signature of authorised staff member		
		Recommended (signature)	Yes	No

Unit Code	Unit Name	VACTS TO COMPLETE Signature of authorised staff member		
		Recommended (signature)	Yes	No

Unit Code	Unit Name	VACTS TO COMPLETE Signature of authorised staff member		
		Recommended (signature)	Yes	No

Your signature: _____ Date: _____

(Sign here when you submit your application)

PLEASE ENSURE THAT DOCUMENTATION SUPPORTING YOUR APPLICATION IS ATTACHED

This section to be completed by VACTS:

You have been provided with credit transfers for the following units of competency:

_____ _____ _____

_____ _____ _____

_____ _____ _____

Signature (RTO Manager) _____ Date: _____

Sign here to acknowledge that you have received advice about the outcome of your application for credit transfer, and that you understand and accept the outcome of your application for credit transfer. You must sign here only <u>after</u> your application has been processed).

Your signature: _____ Date: _____

Please note: You may appeal against the credit transfer decision. If you wish to appeal, you must do so in writing, within twenty working days of this notification. Please refer to the complaints and appeals policy and procedures in the Student Handbook.