



Credit Transfer Application Form

- Please fill out this form and complete all sections.
- Please ensure that certified supporting documents are attached with this application.

Credit Transfer Application Form			
Section 1 – Student Details			
Student Name:		Student ID.:	
Course Code and Name:			
Section 2 – Application and Declaration			
Student:			
<input type="checkbox"/> I wish to apply for credit transfer for the units of competency/modules provided to the institute.			
<input type="checkbox"/> I have attached original copy of certification documentation from another RTO.			
<input type="checkbox"/> I declare that certification documentation supplied is legitimate, true, and correct.			
<input type="checkbox"/> I understand that the Assessor will verify my certification documentation for validity.			
Student Signature:		Date:	/ /
Note: Greenhill Institute may decide to reject an application from a student in the event that the VET transcripts issued by the Registrar cannot be authenticated.			



FOR OFFICE USE ONLY						
Section 3 - Units /Modules Outcome (Please ensure that certified supporting documents such as Statement of Attainment/Result or Official Transcripts are attached with this application)						
Institute representative to complete		Assessor Only				
Credit Transfer From (Mention previous unit code & unit name)	Credit transfer to (Mention current unit code & unit name)	Evidence against the credit transfer requested	Evidence supplied	Evidence Verified	Assessment Outcome	Assessor Initial
			<input type="checkbox"/>	<input type="checkbox"/>		
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			<input type="checkbox"/>	<input type="checkbox"/>		

Please note: If CT (Credit Transfer) is being applied for more than 20 units, please use the additional page



Section 4 – Assessor Judgement and Declaration					
<input type="checkbox"/> I declare that I have verified certification documentation and the documents supplied by the student are legitimate, true, and correct.					
Application Approved/Credit Transfer Granted: <input type="checkbox"/> Yes <input type="checkbox"/> No					
IIT Assessor Name:					
Assessor Signature:		Date:		Initials	
Admin Use only					
SMS Updated:		<input type="checkbox"/> Yes <input type="checkbox"/> No	Date:		Initials
Student file updated:		<input type="checkbox"/> Yes <input type="checkbox"/> No	Date:		Initials
Credit Transfer Record Register Updated:		<input type="checkbox"/> Yes <input type="checkbox"/> No	Date:		Initials