

Credit Transfer Application Form



Title

Mr

Mrs

Ms

Miss

USI

Student Name

Date of Birth

Student Address

Street

Town/Suburb

State

Postcode

Contact Phone Nos:

Home

Work

Mobile

Email

Can you provide an original Academic Transcript/Certificate/ Statement of Attainment from your previous institution? Please (✓) the appropriate box. (Please note: If selected 'no', Interaction Consultation Group (ICG) will be unable to process your application)

Yes

No

Process

1. Provide your **original academic transcript/certificates** to ICG indicating all the units you have achieved competency in at your previous educational institute. The Institute will make a copy and return the original document to you.
2. On the page below, **identify the units of competency** for which you are applying for credit transfer (make sure that **unit codes and names** are identical to those on your academic transcript. Please contact ICG as if you are unsure of any step)
3. Submit this completed Application Form, either via email: icg@interactionconsulting.com.au or drop it at the Interaction Consulting Group Administration Office.
4. Once your application has been processed, ICG will advise you on the outcome of your Credit Transfer application via email or in writing addressed to your nominated postal address on the application.

STUDENT DECLARATION

I declare that I have submitted the original or certified copies of all Certificates/Statements of Attainment/ Academic records with this application to ICG for the purposes of this Credit Transfer application and these are authentic documents obtained through accredited training providers. I understand that the Assessor will verify my certification documentation for validity.

Student Name

Signature

Date

RTO REPRESENTATIVE DECLARATION

The above application has been reviewed and outcomes indicated. All original or certified copies of the certificates/statements of attainments have been sighted and are attached to this application.

Representative Name

Signature

Date

For Office Use Only

Please (✓) as appropriate:

Original or certified Certificates / Statements of attainment(s) are attached, sighted and copies retained in the student file

Yes

No

NA

Date

Initial of your Name

'CT Granted' column above is completed

Yes

No

NA

Date

Initial of your Name

Where CT is not granted a written explanation has been provided

Yes

No

NA

Date

Initial of your Name

Has student been notified of the outcome?

Yes

No

NA

Date

Initial of your Name

Student Enrolment Records have been updated in the Student Management System (SMS)

Yes

No

NA

Date

Initial of your Name