



## Credit Transfer Application Form

Global Healthcare Management College Pty Ltd The Trustee for GHMC Trust (herein referred to as "GHMC")

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

Credit Transfer Application Form			
<b>Section 1 – Student Details</b>			
<b>Student Name:</b>		<b>Student ID.:</b>	
<b>Course Code and Name:</b>			
<b>Section 2 – Application and Declaration</b>			
<b>Student:</b>			
<input type="checkbox"/> I wish to apply for credit transfer for the units of competency/modules as given on this form.			
<input type="checkbox"/> I have attached an original copy of certification documentation from another RTO.			
<input type="checkbox"/> I declare that the certification documentation supplied is legitimate, true and correct.			
<input type="checkbox"/> I understand that the Assessor will verify my certification documentation for validity.			
<b>Student Signature:</b>		<b>Date:</b>	/ /



**Note:** GHMC may decide to reject an application from a student if the VET transcripts issued by the Registrar cannot be authenticated.

**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)

Student to complete		Assessor Only (FOR OFFICE USE 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"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		
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			<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		
			<input type="checkbox"/>	<input type="checkbox"/>		

**Please note: If you are applying CT (Credit Transfer) for more than 20 units please use the additional page**



**Section 4 – Assessor Judgement and Declaration (FOR OFFICE USE ONLY)**

I declare that I have verified certification documentation and the documents supplied by the student are legitimate, true, and correct.

**Application Approved:**  Yes  No

**GHMC Assessor Name:** \_\_\_\_\_

<b>Assessor Signature:</b>	_____	<b>Date:</b>	_____	<b>Initials</b>	_____
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**ADMIN USE ONLY**

<b>SMS Updated:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Date:</b>	_____	<b>Initials</b>	_____
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<b>Student file updated:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Date:</b>	_____	<b>Initials</b>	_____
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<b>Credit Transfer Record Register Updated:</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Date:</b>	_____	<b>Initials</b>	_____
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