



Credit Transfer Application

To be filled out by the student and submitted to Riverdale Institute (RI) office via email or post or in person.

Student's Details

Full Name

Full Address

Contact Number

Course Code & Name

Please provide the information regarding units for which you require to have the credit transfer:

Information related to credit transfer:

- ▶ For application to be processed further, the students need to provide the Statement of Attainment or Record of Results or transcript or some other document as an evidence of completion of the unit(s), issued by a registered training Organisation in Australia.
- ▶ Student must fill in the Credit transfer application form.
- ▶ If the application gets approved, the length of the course will be shortened accordingly.
- ▶ The student will be communicated the outcome of the application promptly.

Privacy Statement:

RI stores and uses personal information only for the purposes of administering student enrolment and education. The information collected is confidential and will not be disclosed to third parties without student's consent, except to meet government, legal or other regulatory authority requirements. The information collected in this form is just to meet the compliance requirements and obligations. It must be noted by the Student that the information collected during the enrolment process and in this form can be provided to Australian government and the designated authorities in certain circumstances. Under the Privacy Act 1988, Students can access their personal information held on them and they may request corrections to information that is incorrect or out of date.



Student Declaration:

I hereby declare that I wish to apply for course credit as outlined in this form. I confirm that I have been provided with all relevant information regards course credit and that I have accessed the applicable policy on the Riverdale Institute website. I further declare that the attachment accompanying this form is a soft/hard copy of my original academic document. I affirm that all information provided in this form is true, correct, and complete to the best knowledge.

Student Name

Date

Student Signature

Office use only: Credit Transfer Application outcome

Credit Transfer Approved?



YES



NO

If No, please provide the

Effects of credit transfer

- Recommended reduction of _____ weeks/months from the proposed course duration.
- Change in timetable / training plan.

Checklist for finalising the Credit Transfer Application:

- Has the Student been notified of the changes as result of credit transfer?
- Has it been updated on Student Management System?
- Please file this document along with the application in student file.

Comments if any:

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I declare that I have been communicated the outcome of the Credit Transfer Application and I am satisfied with the outcome.

Student Name

Student Signature

Date

Staff name

Staff Signature

Date



Level 1, 120 Miller Street, West Melbourne, VIC 3000



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