

### Note

1. This form should be completed at enrolment to ensure that your Training Program is accurate.
2. Provide originals or copies verified by the issuing educational organisation.
3. Students have the right to appeal the credit transfer decision in accordance with the Complaints and Appeals Policy.

<b>First name</b>				<b>Last name</b>			
<b>Student ID number</b>		<b>Date of birth</b>		<b>Phone</b>		<b>Email</b>	
<b>Address</b>							
<b>Qualification title for which credit is sought</b> (qualification currently enrolled in):						<b>Qualification code</b>	
<b>Qualification title for which credit is claimed</b> (qualification previously studied):						<b>Qualification code</b>	
<b>Name of issuing institute/provider</b> (qualification previously studied):						<b>State</b>	
<b>Evidence Type</b>	<input type="checkbox"/> Academic transcript <input type="checkbox"/> Statement of attainment <input type="checkbox"/> USI transcript						
<b>Document verified by AIDT staff</b>		<input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Staff name</b>			<b>Date</b>
<b>Unit from previous qualification</b>		<b>Unit of competency from the currently enrolled AIDT qualification</b>			<b>Outcome</b>		
<b>Unit Code</b>	<b>Unit Title</b>	<b>Unit Code</b>	<b>Unit Title</b>	<b>Tick the appropriate box</b>	<b>Assessor Signature</b>	<b>Date</b>	
				<input type="checkbox"/> Identical unit <input type="checkbox"/> Superseded and equivalent unit <input type="checkbox"/> Not equivalent unit (credit transfer not granted)			

## Credit transfer application form

Unit Code	Unit Title	Unit Code	Unit Title	Tick the appropriate box	Assessor Signature	Date
				<input type="checkbox"/> Identical unit <input type="checkbox"/> Superseded and equivalent unit <input type="checkbox"/> Not equivalent unit (credit transfer not granted)		
				<input type="checkbox"/> Identical unit <input type="checkbox"/> Superseded and equivalent unit <input type="checkbox"/> Not equivalent unit (credit transfer not granted)		
				<input type="checkbox"/> Identical unit <input type="checkbox"/> Superseded and equivalent unit <input type="checkbox"/> Not equivalent unit (credit transfer not granted)		
				<input type="checkbox"/> Identical unit <input type="checkbox"/> Superseded and equivalent unit <input type="checkbox"/> Not equivalent unit (credit transfer not granted)		
				<input type="checkbox"/> Identical unit <input type="checkbox"/> Superseded and equivalent unit <input type="checkbox"/> Not equivalent unit (credit transfer not granted)		

## Credit transfer application form

Unit Code	Unit Title	Unit Code	Unit Title	Tick the appropriate box	Assessor Signature	Date
				<input type="checkbox"/> Identical unit <input type="checkbox"/> Superseded and equivalent unit <input type="checkbox"/> Not equivalent unit (credit transfer not granted)		
				<input type="checkbox"/> Identical unit <input type="checkbox"/> Superseded and equivalent unit <input type="checkbox"/> Not equivalent unit (credit transfer not granted)		
				<input type="checkbox"/> Identical unit <input type="checkbox"/> Superseded and equivalent unit <input type="checkbox"/> Not equivalent unit (credit transfer not granted)		
				<input type="checkbox"/> Identical unit <input type="checkbox"/> Superseded and equivalent unit <input type="checkbox"/> Not equivalent unit (credit transfer not granted)		
				<input type="checkbox"/> Identical unit <input type="checkbox"/> Superseded and equivalent unit <input type="checkbox"/> Not equivalent unit (credit transfer not granted)		

<b>Student declaration</b>	<p>I warrant that the information on this form is correct and complete. I acknowledge that the provision of incorrect information or the withholding of relevant information relating to my application, including academic transcript/s, might invalidate my application and that AIDT may withdraw an offer of a place or cancel my enrolment in consequence.</p> <p>I understand that credit transfer may reduce my course duration and may affect tuition fees and my Confirmation of Enrolment COE (if applicable).</p>				
<b>Student Signature</b>				<b>Date</b>	
<b>For office use only</b>					
<b>Student advised of outcome via email</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Outcome notification date</b>		<b>Amendment of COE required</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>New COE has been issued</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		<b>Student management system (Teams) has been updated</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Staff name</b>			<b>Staff signature</b>		<b>Date</b>