Credit Transfer Application Form

MPA SKILLS
TRADE TRAINING + EMPLOYMENT

Section 1 – Client & Visit Details

Client Name:		Client No.:	

Qualification / Course:

Assessor Name:		Date:	/ /

Section 2 – Application and Declaration

Client:

- ☐ I wish to apply for credit transfer for the units of competency/modules listed below.
- ☐ I have attached original copy of certification documentation from another RTO.
- ☐ I declare that certification documentation supplied is legitimate, true and correct.
- ☐ I understand that the Assessor will verify my certification documentation for validity.

Client Signature:		Date:	/ /

Section 3 – Units /Modules Outcome

Unit Code	Unit Name	Assessor Only			
		Evidence supplied	Evidence Verified	Assessment Outcome	Assessor Initial
		☐	☐		
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Section 4 – Assessor Judgement and Declaration

- ☐ I declare that I have verified certification documentation supplied, is legitimate, true and correct.

Assessor Name (Print):	Assessor Signature:	Date:
		/ /

Admin Use Only

SMS Updated :	☐ Yes ☐ No	Date:	/ /	Initial:	
Client file updated :	☐ Yes ☐ No	Date:	/ /	Initial:	