

Postal: PO Box 5013 Chittaway Bay NSW 2261 Street: 16/1 Reliance Drive Tuggerah NSW 2259 Email: <a href="mailto:info@tlkcc.com.au">info@tlkcc.com.au</a> Web: <a href="mailto:www.tlkcc.com.au">www.tlkcc.com.au</a>

Phone: (02) 4353 0017

National RTO No: 90381 ABN: 47 568 269 236

# **Credit Transfer Application Form**

Full name				
Address				
Contact number				
Email				
Applicant information The following guidelines	apply to applications for credit transfer to TLK Community College:			
	ntitled to apply for credit transfer in a course or qualification in which enrolled and have paid the applicable enrolment and tuition fees.			
Credit transfer is the	• Credit transfer is the recognition of learning achieved through formal education and training.			
<ul> <li>Qualifications and S recognised by all otl</li> </ul>	tatements of Attainment issued by any RTO are to be accepted and ner RTOs.			
• Participants may not apply for credit transfer for units of competence or qualification which are not included in the College's scope of registration.				
	<ul> <li>While participants may apply for credit transfer at any time, they are encouraged to apply as soon as enrolled and before commencing the training program.</li> </ul>			
<ul> <li>There is no application fee to apply for credit transfer. If you are granted credit transfer, a revised fee for the qualification will be calculated based on the outcome of the credit transfer process.</li> </ul>				
Credit transfer may	only be awarded for whole units of competence.			
	only be issued when the participant's enrolment includes at least one tence for which the participant is participating in training or is seeking			
Participants may no	t enrol only for credit transfer.			
	ransfer, the applicant must complete this form and produce relevant alification or Statement of Attainment) for College sighting of originals			
_	duct a Unique Student Identifier (USI) transcript search, as applicable, via USI number, to confirm previously completed nationally recognised Units			
Name of current course or program of study at TLK Community College:				

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Version: 15th February, 2021



Office use only:

Credit transfer granted by: \_\_\_\_\_

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## **Credit Transfer Application Form**

List Unit/s of Competency Previously Completed (as applicable)		List Units in Current Course where Credit Transfer is Sought		Official Use Only
Unit Code	Unit Title	Unit Code	Unit Title	Approved / Not Approved / Remarks

Date:\_



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### **Privacy Disclosure Consent**

This form is used to obtain consent from students applying for a credit transfer or recognition of current competence against qualifications obtained through another registered training organisation.

### **Acknowledgement and Consent**

By completing and signing this form I,	_ (name in full)
of (address)	
provide my express acknowledgement and consent for the purposes of the Privacy Ac	t 1988 (Cth),
for TLK Community College to disclose and search my personal information for the fol	lowing
purposes:	

- Contacting the Registered Training Organisation/s (including TAFE where applicable) which issued the attached qualification/s as applicable
- Requesting confirmation of authenticity for the qualification/s as applicable
- Searching and confirming Unique Student Identifier (USI) transcript information, as applicable, via a validated student USI number.

#### **Conditions**

Please specify any conditions (if any)	relating to the disclosure of your personal information which
you are seeking:	
Applicant Name:	
Signature of applicant:	
Date:	