

Tick 🗸	Credit Transfer/RCC: Assessment Application Form																	
	of curi	of current previous maint (RCC):			ognition of Current Competency (RCC) only applies if a learner has successfully completed the requirements iously for a unit of competency or module and is now required to be reassessed to ensure that the competence is being stained (AVETMISS Standard Edition 2.3 November 2016). In this case no extra skill or competencies are recognised. It is an assessment process that may be required for licensing purposes or defined units of competency where skill irements are regularly updated													
	Prior Studies at ar			edit Transfer relates to institutional recognition of any unit of competency or module a student has successfully completed any other Registered Training Organisation (RTO). Credit transfer is a process that provides students with agreed and asistent credit outcomes based on identified equivalence in content and learning outcomes between matched qualifications														
Student Details:  (PLEASE PRINT CLEARLY)																		
Given Name/s:				(I ELITOL FRANT SELVATET)							Date of Birth:			DD / MM / YYYY				
(Family/last) Surname:											Gender:(circle)			М	F		X	
Title: (circle)				Ms.	Mrs.	Mr.	Dr.	r. Other			Mobile No:							
Drivers licence No:					State						Ту	/pe						
Street Address:			ess:			L			ı					STA	TE	P/C	ODE	
Email address:											Altern	nate N	o:					
				SI Nu	ımhar: l	Unique Stu	ident ld	lonti	ifier:									
USI Number: Unique Student Identifier:  Details of Course/Unit You are Applying for																		
Unit Code:						Name of	Unit:											
NOTE – A new application is required for each Unit of Competency applied for.																		
Credit for Prior Studies (Credit transfer)																		
Unit C	it Code:					Name of	Unit:											
Issued				<u>YYY</u>		Issued b	У											
Certific				ate erifie	d	DD / MM	<u> YYYY</u>		Verification Reference									
				Recognition of Current Competency (RCC)														
Unit C	Unit Code:					Name of	Unit:											
Issued date:		M / YYYY			Issued by RTO:													
Certifi Verifie	ed	Yes / No I		Date Verified		DD / MM	<u>DD / MM / YYYY</u>		Verification Reference									
Licens Requi	sing rement	Yes / No		Licensing Description														
	red for e purpo	regular oses		Ye	es / No	Update Purpose												
Acceptable for asse only process			smen	t Ye	es / No	Reason												
														-			-	



Learner Declaration:	Learner Signature: (sign below)								
I (Full legal name)  I have been made aware of all terms, condition including complaints & appeals, legislation awa  The information given in this application is true knowledge  The materials submitted, is my own personal w plagiarism, copying, cheating or collusion to ac  If I have any "special needs" or difficulty with la let my trainer/assessor know	Dec. Date:	<u>DD <u>/</u> MM <u>/</u> YYYY</u>							
OFFICE USE ONLY									
Assessor's Name:	Signat	ture:							
Credit for Prior Studies (Credit transfer):	granted [	<u>not</u> grante	d 🗌						
Recognition of Current Competency (RCC):	granted	<u>not</u> grante	d 🗌						
Date:									

Related Standard/s: Clauses 1.8, 1.12, 3.5