

Application for Credit Transfer

Personal Details								
Given Name			Surname					
Address								
Suburb			State			Postc	ode	
Email								
Mobile Numbe	r			Date of	Birth		/	/
Have you studi	ed with	us previously?	⊠ Yes	□ No)			
If yes, when wa	as your l	ast year of study?		USI Num	ber			
Request Cred	it Trans	fer for the following	Unit(s) of Co	mpetenc	У			
Unit Code	Unit T	itle					Yea	r Completed
Please ensure th	e followi	ng documents are atta	ched to this for	m:				
 A certified copy of your Statement of Attainment, Testamur, Academic Transcript showing the institution name, completion date, unit code(s), unit title(s) and results. 								
 Where documentation is issued in another name (e.g.: maiden name), you must provide a certified copy of change of name documentation (e.g.: Certificate of Marriage) 								
 Should evidence provided be in a language other than English, a translation by an accredited translator must be provided. 								
Student Signa Typed name accep					Date			



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How to Submit:

Option 1	Option 2	Option 3
Submit original documentation to: NIET reception	Email to: bne.studentservice@niet.edu.au	Deliver to: NIET Group (AAI) 8 Clunies Ross Court Eight Mile Plains Q 4113

OFFICE USE ONLY

Application Received by:	Date	
Signature:	Submit to Academic Coo	rdinator

Credit has been granted for the following units			
Unit Code	Unit Title		
Approved by		Date	
Signature:			

Competency Status: CT – Cre Student Management Syster		
Entered by:	Date	
Signature:		