



# CREDIT TRANSFER APPLICATION FORM

Before completing this application form, please ensure you have read the Student Guide as it gives you the information you need to complete the application form.

What you need to do Complete Sections A-E on this form; attach your evidence and pay the application fee of \$100. Students granted Credit Transfer are eligible to receive a partial reimbursement of the course fee based on the nominal hours of the units granted. All documents must be in English and be certified (read the Guide for explanation). You will be sent a letter detailing the result after you application has been processed.

### A. Personal Detail

Surname: .....  
Given Name: .....  
Address: .....  
Postcode: .....  
Telephone: Work: ..... Home: ..... Mobile: .....

### B. Course Information

Name of course: .....  
Commencement Date: .....

### C. Credit Transfer Information

In the left 2 column list the unit code(s) and title(s) from the Mayfield course you are requesting Credit Transfer for. IMPORTANT: If the Mayfield course codes do not exactly match the unit codes from your previous study you need to use the RPL application form.

Mayfield Course Units you are requesting exemption for		Office use only Course Coordinator		
Unit Code	Unit Title	Unit Nominal Hours	Granted Y / N	Comment
Total Nominal Hours of granted Credit Transfer Completed by Course Coordinator				
Course Coordinator Signature:				Date:

### D. Evidence Attached

Please tick:  Certified copy of Certificate/Diploma/Degree  
 Certified copy of Statement of Results/Transcript of Results

The units listed on your certificate and statement of results must match or be equivalent to the unit(s) you are enrolled in to be successful in Credit Transfer. If they have some of the same topics/content but are not deemed equivalent then you can use them as evidence in an RPL/RCC application. Speak to your course Coordinator for further guidance.



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### E. Payment of \$100 fee

I have enclosed:

- Bank Cheque (payable to Mayfield Education) – no personal cheques  
 Money Order

Or charge to (1.5% surcharges apply for credit card payments):

Visa  MasterCard  tick then complete details below **CLEARLY:**

Cardholder's Name (as it appears on card) .....

Card Number   

Card expiry date .....

Authorised Signature ..... Date.....

I understand this fee is non-refundable and the application can only be processed if the necessary documentation is attached

Signed ..... Date.....

### Payment processed

Office Use Only			
Application Fee Paid: Signature: Assistant Accountant		Amount Paid: \$	Date

### Assessment result – completed by Mayfield Education

Office Use Only						
<b>Course Coordinator</b>	Number of Units granted Credit Exemption as detailed in Section C.					
	Full Course Hours		Training Plan Updated	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
	Comment					
	Signature		Date			
<b>Student Services</b>	Refund: <input type="checkbox"/> Fee Reduction: <input type="checkbox"/> Invoice No To Be Applied:.....					
	Cost of Granted Credit Transfer Units	Hourly Rate	\$	Granted C/T units nominal hours (Ref to Section C)		
		Total Refund / Reduction: \$.....				
<b>Director Education</b>	Comment					
	Signature		Date			
<b>Assistant Accountant</b>	Refund Cheque No. If applicable		Credit Note No. If applicable			
	Signature		Date			
<b>Secretarial Services</b>	Letter Sent	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Copy to compliance officer	Yes <input type="checkbox"/>	No <input type="checkbox"/>
	Signature		Date			

Original CT form & a copy of the letter kept in student file with evidence attached