

CREDIT TRANSFER APPLICATION FORM

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Triple Five Group Pty Ltd T/A Pinnacle Institute RTO No: 41329 | ABN: 42 607 056 959 | CRICOS: 03942G Email: admin@pin.edu.au | Web: www.pinnacleinstitute.edu.au



Credit Transfer Application Form

Student Details				
Name:				
Date of Birth:				
Date of Application:				
Qualification Details (the course you will be enrolling into): Qualification Code: Qualification Title: Assessor Checklist				
 The client wishes to apply for credit transfer and/or competencies held are applicable to their intended enrolment. Copy of Statement of Attainment from the issuing RTO has been attached and authenticity has been verified. If student has a superseded and equivalent unit, the currency of the unit has been validated from 				
training.gov and screen shots have been provided.				
Completed Unit Code from Transcript	Unit Code Student is applying for	D- Direct unit S- superseded and equivalent		Evidence Verified
	applying for			
		D		
		D		
		D		
		D		
		D		
		D		
		D	□ S	
		D	□ S	
Assessor Judgement & Declaration				
□ I have verified that certification documentation supplied is legitimate, true and correct and credit should be granted.				
Assessor Name:				
Assessor Signature:				
Date:				
ATTACH VERIFIED COPY OF STATEMENT OF ATTAINMENT AND IF REQUIRED SCREEN SHOTS OF SUPERSEDED AND EQUIVALENT EVIDENCE				

Pinnacle Institute

6/34 Old Cleveland Rd, Stones Corner QLD 4120

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