

### Instructions

- Identify (by ticking) the unit of competency you wish to apply for course credit.
- Submit your application form with original/certified supporting documents to the Marketing/Student Services (where relevant) by the first Friday of the first week of the first term of your course.
- This completed form is forwarded to the Program Manager (or delegate) who will contact you to discuss your application.
- There are no fees for credit transfer applications.

### Glossary

- CT (Credit Transfer)** - The granting of status or credit by an institution or training organisation to students for units of competency completed at the same or another institution or training organisation.

### Section 1 – Student to Complete

<b>First Name</b>		<b>Last Name</b>	
<b>Contact Number</b>		<b>Email</b>	

### \*For current students only

<b>Student Number</b>	
<b>Course Enrolled</b>	

**Note: Please identify (by ticking) the unit of competency you wish to apply for course credit**

### HLT33115 Certificate III in Health Services Assistance

Subject	Unit Code	Unit Title	Tick	Office Use Only
The Human Body	HLTAAP001	Recognise healthy body systems		
	BSBMED301	Interpret and apply medical terminology appropriately		
Safety in Health Care	HLTAID003	Provide first aid		
	HLTINF001	Comply with infection control policies and procedures		
	HLTWHS001	Participate in work health and safety		
Basic Care	CHCCCS012	Prepare and maintain beds		
	CHCCCS002	Assist with movement		
	CHCCCS026	Transport individuals		
	CHCCOM005	Communicate and work in health or community services		
Working with Others	BSBWOR301	Organise personal work priorities and development		
	CHCDIV001	Work with diverse people		
	CHCCCS020	Respond effectively to behaviours of concern		
	CHCCCS010	Maintain a high standard of service		
Acute Care	HLTAIN001	Assist with nursing care in an acute care environment		
	HLTAIN002	Provide non-client contact support in an acute care environment		

<b>Supporting Evidence:</b>	Certificate	Transcript	Others: _____
<b>Student Declaration</b>			
<p>I wish to apply for Course Credit in the above-mentioned units and certify that the information supplied by me including any original/certified supporting documents is to the best of my knowledge and true and accurate. I understand that once course credit has been granted, the duration of my course may be shortened, hence a new eCOE will be issued and I will be responsible to advise the Department of Home Affairs for any new changes to my course duration. I understand and agree to follow a different course plan as an outcome of Course Credit grant for the above-mentioned units.</p>			
<b>Signature of Student:</b>			<b>Date:</b>

<b>Office Use Only</b>	
<b>Section 2 – Marketing or Student Services to Complete</b>	
To be completed <b>BEFORE</b> Program Manager (or delegate) assessed application:	
<b>Received and Checked By:</b>	
<b>Signature:</b>	
<b>Date:</b>	
<b>Section 3 – Program Manager (or Delegate) to Complete</b>	
<b><u>GRANTED</u></b>	
Number of units granted	_____
Duration of Course affected:	_____ Proposed new end date: _____
Notes:	
<b>Action Plan:</b>	
<b><u>REFUSED</u></b>	
Number of units refused:	
Reason for refusal:	

<b>Assessed and Approved by Program Manager (or Delegate)</b>			
<b>Name:</b>			
<b>Signature:</b>		<b>Date:</b>	

### Section 4 – Marketing or Student Services to Complete

4.1 Student has been contacted in writing of the following information:

- The outcome of course credit application (Granted/Refused).
- If granted:
  - The duration of their course may be shortened, hence a new eCOE will be issued and they will be responsible to advise the Department of Home Affairs for any new changes to their course duration.
- If refused:
  - According to National Code Standard 10, they reserve the right to access Skills Training Australia’s grievance and appeals processes within 20 days of receiving this decision to have their grievances heard and addressed.

<b>Contacted by:</b>			
<b>Signature:</b>		<b>Date:</b>	

4.2 To be completed **(only if Course Credit is granted)**

New eCOE created:

Yes    Created by: \_\_\_\_\_    Signature: \_\_\_\_\_    Date: \_\_\_\_\_

N/A

Updated student enrolment in SMS by: \_\_\_\_\_    Signature: \_\_\_\_\_    Date: \_\_\_\_\_