

APPLICATION FOR COURSE TRANSFER FORM

This form is to be completed if you are applying to transfer **a) to another that is offered by your college b) to a course that is offered by another college associated with THINK: Colleges or c) your mode of study.**

PERSONAL DETAILS

Family Name: (Surname) First Name:

Student ID #:

COURSE TRANSFER INFORMATION

1) I wish to transfer to a new course: *(Please write course names in the space provided below)*

Name of Original course you are enrolled in:

Name of course you would like to Transfer to:

When did you want to commence your course? Year: Intake / Semester:

2) I wish to transfer my mode of study: *(Please tick the change that applies to your request)*

Please note that to change individual classes or a single study period the Application for Timetable Change Form should be used

Full Time study to Part Time Study	<input type="checkbox"/>	Part Time Study to Full Time Study	<input type="checkbox"/>
On Campus to Online / Distance	<input type="checkbox"/>	Online / Distance to On Campus	<input type="checkbox"/>

GENERAL INFORMATION *(Please answer all questions by ticking Yes or No)*

Do you want to apply for Course Credit? <i>(Please complete the Course Credit Application form and attach it to this form)</i>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Have you started the course that you would like to transfer from?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Are you aware of potential financial / academic penalty associated with transferring your course after commencement?	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
Are your FEES paid up-to-date? <i>(If you answer No or you are unsure, please contact Student Services)</i>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

CIRCUMSTANCES OF TRANSFER

*(Write a brief outline of the circumstances relating to your request to Transfer below. You **MUST** attach all relevant evidence to this form)*



CHECKLIST

The following is a checklist to help ensure that you have completed and attached all your documentation correctly before **submitting this form to Student Services for processing**.

PERSONAL DETAILS:

Have you filled in your personal details correctly?

COURSE TRANSFER INFORMATION:

Have you ticked the box to indicate that you would like to transfer your course?

Have you put the correct details of the course you would like to transfer to?

Have you completed the commencement year / Semester/Trimester information requested?

OR

Have you ticked the box to indicate you would like to transfer to a different mode of study?

Have you ticked the box to indicate what you would like to transfer to?

GENERAL INFORMATION:

Have you ticked the box to apply for course credit? (if applicable)

Have you checked if there are any academic / financial penalties involved in this transfer?

Have you ticked the box to indicate that your fees are paid and up to date?

CIRCUMSTANCES OF TRANSFER

Have you noted the circumstances for which you are applying for a transfer and attached relevant documentation to support your application?

DECLARATION

Have you signed and dated the form(s)

DECLARATION

I declare that to the best of my knowledge, the information I have supplied on this form is true and correct. I have read and understood the Course Transfer Policy and Procedure provided with this form

Signature:

Date:

Office Use only

Received by

Received Date

All documents claimed by applicant have been sighted and are attached

YES

NO

