

Student Exemption Form

Australian City International College recognises qualifications and statements of attainment issued by other Registered Training Organisation under the Australian Qualifications Framework. This form is to be completed by the student when requesting credit transfer or recognition of prior learning for specific units. Please complete all fields and email this form with certified copies of Statements of Attainment or Qualifications and Transcripts to Student Services at studentservices@acicollege.edu.au. Please refer to ACIC Credit Transfer and Recognition of Prior Learning Policy. If you require any assistance in completing this form, please contact Student Services.

STUDENT DETAILS

Student Name		Student ID	
Course Title			
Email		Mobile	

RECOGNITION DETAILS *What type of recognition are you applying for? Choose (tick)*

RPL – A Skills Assessment form will need to be completed to support this application (An RPL Kit will be provided to you)

Credit Transfer (Complete the details in the table below) you will need to provide evidence of the units completed

Units Applied for Credit Transfer

I wish to apply for Credit Transfer for the following unit/s. Please find attached certified copies of my Statements of Attainment or Qualifications and Transcripts for the relevant unit/s.

Unit Code	Unit Title	Equivalent	
		Yes	No
		<input checked="" type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

STUDENT DECLARATION

I declare that all information provided by me in this form, including supporting documentation is true and correct, and I wish to apply for exemptions for the above-named units of competency. I understand that where exemptions are granted, it may result in shortening of my course duration. I also understand that this information will be provided to the Department of Home Affairs (DHA) through PRISMS and may affect my student visa.

Student Signature		Date	
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OFFICE USE ONLY

Original Certificates / Statements of attainment(s) and Transcript(s) have been sighted and verified?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Copies of all Certificates / Statements of attainment(s) and Transcript(s) are attached to this application?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

EXEMPTION SUMMARY

Assessor to Complete

Unit Code	Unit Title	CT Granted	
		Yes	No
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>

Assessor Name			
Assessor Signature		Date	

Account Officer to Complete *(Applicable Fees Adjustment)*

Course Tuition Fees \$			
Total Fees Reduction \$			
Adjusted Fee Total \$			
Course Duration Changed?	<input type="checkbox"/> No <input type="checkbox"/> Yes If yes, insert the new end date		
Staff Signature		Date	
Student Signature		Date	