

Course Credit Transfer Application Form – Certificate IV in Beauty Therapy



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 Marketing/Administration Officer (where relevant).
- This completed form is forwarded to the Head Trainer and Assessor who will contact you to discuss your application if needed.
- There are no fees for Credit Transfer application.

Glossary:

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

Section 1. Student to Complete

First Name: _____ Last Name: _____

Contact Number: _____ Email: _____

***For current student only**

*Student Number: _____

*Course Enrolled: _____

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

Certificate IV in Beauty Therapy (SHB40115)			
Unit Code	Unit Title	Tick	Office Use Only
SHBBINF001	Maintain infection control standards		
SHBBCCS001	Advise on beauty products and services		
SHBBMUP002	Design and apply make-up		
SHBBMUP003	Design and apply make-up for photography		
SHBBMUP004	Design and apply remedial camouflage make-up		
SHBXCCS002	Provide salon services to clients		
SHBBFAS003	Provide specialised facial treatments		
SHBBFAS002	Provide facial treatments and skin care recommendations		
SHBBFAS001	Provide lash and brow services		
SHBBSKS005	Provide micro-dermabrasion treatments		
SHBBBOS003	Provide body treatments		
SHBBBOS002	Provide body massages		
SHBXIND001	Comply with organisational requirements within personal services environment		
SHBXWHS001	Apply safe hygiene, health and work practices		
SHBXCCS001	Conduct salon financial transactions		
SHBBRES001	Research and apply beauty industry information		
SHBBBOS001	Apply cosmetic tanning products		
SHBBNLS001	Provide manicure and pedicure services		
SHBBHRS001	Provide waxing services		

Supporting evidence: Certificate Transcript Others: _____

Student Declaration:

- I wish to apply for Course Credit in the above-mentioned course or unit/s 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. A new electronic Confirmation of Enrolment (eCOE) will be issued for international students.
- I will be responsible for advising the Department of Home Affairs for any new changes to my course duration (for international students only).
- I understand and agree to follow a different course plan as an outcome of Course Credit grant for the above-mentioned course or units.

Signature of Student: _____ Date: _____

Official Use Only

Section 2. Marketing or Administration Officer to Complete

Received and checked by: _____ Signature: _____ Date: _____

Note: To be completed before Head Trainer and Assessor assesses the application.

Section 3. Head Trainer and Assessor to Complete

GRANTED

Number of units for which credits are granted: _____

Course duration after credits are granted: _____

Notes:

Action Plan:

REFUSED

Number of units refused: _____

Reason for refusal

Assessed and approved by Head Trainer and Assessor

Name: _____ Signature: _____ Date: _____

Section 4. Marketing or Administration Officer to Complete

4.1 Student has been contacted, informed of and acknowledged 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 to international students and they will be responsible for advising the Department of Home Affairs of any new changes to their course duration.
- If refused
 - According to National Code Standard 10, they reserve the right to access the College's complaints and appeals processes within 20 days of receiving this decision to have their grievances heard and addressed.

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

- New eCOE created for International Students

Yes Created by: _____ Signature: _____ Date: _____
 N/A

- Updated student enrolment in VETtrak by: _____ Signature: _____ Date: _____