

**Credit Transfer Application  
CHC30121 Certificate III in Early Education Childhood and Care**

**Acceptable evidence**

- Certificate, Diploma or statement of attainment issued by another RTO or government regulator
- Qualification or unit/s listed on VET transcript associated with student's USI.

You must leave us with a verified copy that will not be returned to you. 'Verified' means a copy has been:

- signed by a Justice of the Peace or a Commissioner of Declarations who has sighted the original **OR**
- original document is shown to an authorised officer of this organisation who stamps and signs a copy for our records.

Name [Please print]			
Phone contact			
Email contact			
Signature		Date	

**I am enrolled in this qualification** [please print]

**I am applying for Credit Transfer for:**

Code	Title	Nominal Hours Credit Transfer	Evidence provided <input checked="" type="checkbox"/> tick relevant box
CHCECE030	Support inclusion and diversity	63	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHCECE031	Support children's health, safety and wellbeing	160	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHCECE032	Nurture babies and toddlers	108	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHCECE033	Develop positive and respectful relationships with children	100	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHCECE034	Use an approved learning framework to guide practice	80	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHCECE035	Support the holistic learning and development of children	100	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHCECE036	Provide experiences to support children's play and learning	75	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHCECE037	Support children to connect with the natural environment	50	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHCECE038	Observe children to inform practice	40	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHCECE054	Encourage understanding of Aboriginal and/or Torres Strait Islander people's cultures	55	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHCECE055	Meet legal and ethical obligations in children's education and care	60	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHCECE056	Work effectively in children's education and care	65	<input type="checkbox"/> Yes <input type="checkbox"/> No

CHCPRT001	Identify and respond to children and young people at risk	40	<input type="checkbox"/> Yes <input type="checkbox"/> No
HLTAID012	Provide first aid in an education and care setting	22	<input type="checkbox"/> Yes <input type="checkbox"/> No
HLTWS001	Participate in workplace health and safety	20	<input type="checkbox"/> Yes <input type="checkbox"/> No
BSBSUS411	Implement and monitor environmentally sustainable work practices	40	<input type="checkbox"/> Yes <input type="checkbox"/> No
CHCDIV001	Work with diverse people	40	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Total number of credited nominal hours</b>			<b>No. units</b>
<b>Total number of nominal hours to complete (1118 hours less CT hours)</b>			

[This completed application form and evidence must be filed on learner file, together with the USI Transcript verification. It may be scanned and held electronically.]

OFFICE USE ONLY					
<b>Credit Transfer awarded</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No Date: ____/____/____	<b>Reason application is unsuccessful</b>			
<b>Verification Sign-off: I confirm that I have checked and confirmed that the above information is complete and correct.</b>					
<b>Administration Officer:</b>		<b>Signature</b>		<b>Date</b>	
<b>RTO Compliance Officer:</b>		<b>Signature:</b>		<b>Date:</b>	