



## CREDIT TRANSFER APPLICATION FORM CHC30102 CERTIFICATE III IN AGED CARE WORK

If you have completed any of the units from your chosen qualification from another Registered Training Organisation / Tafe, we will recognise them at Australasian Lawrence Aged Care College.

In order for your previous units to be recognised, you need to complete and lodge this form at the college.

Please note, we can only recognise a unit that you have completed if :

- It is issued by a Nationally Recognised Registered Training Organisation or TAFE
- It is issued in the form of a Statement of Attainment/Transcript
- The unit code and unit name is an exact match for a unit in your chosen qualification with ALACC

Course Code: CHC30102

Course Name: CERTIFICATE III in Aged Care Work

First Name:

Last Name:

Home Address:

Suburb:

Postcode:

Ph (Home):

Ph (Work):

Mobile:

Date of Birth:    /    /198  
                  dd mm yy

Email:

Gender:    Male     Female

Name of Previous Institution:



## CREDIT TRANSFER APPLICATION FORM CHC30102 CERTIFICATE III IN AGED CARE WORK

QUALIFICATION FOR WHICH CREDIT TRANSFER HAS BEEN APPLIED FOR CHC30102 CERTIFICAT 111 IN AGED CARE WORK		CREDITS APPLIED FOR	CEO/DOS SIGNATURE AND COMMENTS
UNIT CODE	UNIT NAME	<input checked="" type="checkbox"/>	APPROVED? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>CHCAC1C</b>	Provide support to an older person		
<b>CHCAC2C</b>	Provide Personal Care		
<b>CHCAC3C</b>	Orientation to Aged Care Work		
<b>CHCAC6C</b>	Support the older person to meet the emotional and psychosocial needs		
<b>CHCAC15</b>	Provide care support which is responsive to the specific nature of dementia		
<b>CHCCOM2B</b>	Communicate appropriately with clients and colleagues		
<b>CHCINF8B</b>	Comply with information requirements of the aged care and community sectors		
<b>CHCACOHS302A</b>	Participate in safety procedures for direct care work		
<b>CHCORG3B</b>	Participate in the work environment		
	<b>Electives</b>		
<b>CHCCS405A</b>	Work effectively with culturally with diverse clients and co-workers		
<b>HLTCSD203B</b>	Prepare and maintain beds		
<b>HLTCSD306B</b>	Respond effectively to difficult or challenging behaviour		
<b>HLTFA201A</b>	Provide basic emergency life support		

PLEASE ATTACH EVIDENCE OF COMPLETION OF THE ABOVE MENTIONED UNITS IN THE FORM OF A STATEMENT OF ATTAINMENT/ TRANSCRIPT FROM THE ISSUING INSTITUTION

Once you have submitted your credit transfer application, with supporting documentation, you will be notified of the outcome within seven (7) working days.

**Comments:** .....

.....

.....

.....

.....

**CEO/DOS signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_