



## CREDIT TRANSFER APPLICATION FORM DIPLOMA OF COMMUNITY SERVICES MANAGEMENT

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
- The unit code and name is an exact match for a unit in your chosen qualification with ALACC

Course Code: \_\_\_\_\_

Course Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Last Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

Ph (Home): \_\_\_\_\_ Ph (Work): \_\_\_\_\_ Mobile: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/19\_\_\_\_ Email \_\_\_\_\_  
Day Mth Year

Gender: Male [ ] Female [ ]

Name of Previous Institution: \_\_\_\_\_



## CREDIT TRANSFER APPLICATION FORM DIPLOMA OF COMMUNITY SERVICES MANAGEMENT

QUALIFICATION FOR WHICH CREDIT TRASFER HAS BEEN APPLIED FOR CHC51602 - DIPLOMA OF COMMUNITY SERVICES MANAGEMENT		STUDENT PLEASE TICK	ASSESSOR SIGNATURE AND COMMENTS
Unit Code	Unit Name	<input checked="" type="checkbox"/>	APPROVED? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
CHCCOMC3	Utilise specialist communication skills to build strong relationships		
CHCOHS501A	Manage the OHS management system		
CHCORG6B	Co-ordinate the work environment		
CHCORG7B	Manage workplace issues		
CHCORG23B	Co-ordinate work		
CHCORG28A	Reflect and improve upon professional practice		
PSPMNGT605A	Manage diversity		
CHCADMIN4B	Manage the organisation's finances, accounts and resources		
BSBMGT609A	Manage risk		
CHCCS405A	Work effectively with culturally diverse clients and co-workers		
CHCOHS401A	Implement and monitor OHS policies and procedures for a workplace		
CHCOHS502A	Evaluate and improve workplace OHS management systems		
BSBADM502A	Manage Meetings		
CHCCS402A	Respond holistically to client issues		
CHCORG11B	Lead and Develop Others		



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

**Student signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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



## CREDIT TRANSFER APPLICATION FORM DIPLOMA OF COMMUNITY SERVICES MANAGEMENT

**Comments:**.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....  
.....

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

