

Application for Internal Transfer of Credit from study at UC

College of Education



Please print boldly using block letters.

Personal details

Title	Dr / Mr / Mrs / Miss / Ms			
Date of birth (DD/ MM/YY)	/	/		
Surname/Family name				
First or given names				
Address				Postcode
Phone	()	Fax	()	
Email				
University of Canterbury Student ID Number: (if enrolled)				

Transfer of Credit

Qualification you are enrolled in / applying for at the University of Canterbury:

Please list below the courses you wish to have considered for credit and the corresponding UC courses:

Seeking credit for			Towards*	
Qualification	Course code	Course title	Course code	Course title

* You may seek "unspecified credits"

Declaration and signature

I supply the information on this form and in support of this application on the understanding: (a) that it may be used for purposes relating to my enrolment as a student by members of the academic and administrative staff of the University of Canterbury; (b) that I have the right to see and correct, if necessary, the information I have provided and my personal record; (c) that my application cannot proceed without my consent to the foregoing conditions.

I declare that all the information submitted on this application form and in the attached document/s is, to the best of my knowledge, correct and complete in every detail. I acknowledge that if I provide incorrect or incomplete information this may result in the cancellation of any offer made to me, and (if appropriate) disciplinary action by the University. I understand that it is my responsibility to provide all necessary documentary evidence. I authorise the University to obtain whatever further information is necessary in relation to the documents I have submitted.

Send this form to:

Student Advisor
College of Education
University of Canterbury
Private Bag 4800,
Christchurch 8140, New Zealand

Signed		Date	
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