

D. LEAD TRAINERS/TRAINING MANAGERS DECLARATION

The above application has been verified. All original or credited copies of the certificates/statements of attainments have been sighted.

- There is no reduction in duration of the course.
- There is reduction in the duration of the course by hrs.

Assessor's Name: _____ Signature _____ Date _____

E. ACCOUNT DETAILS

Total hours for course

Total hours approved for Credit TransferApplicable total tuition fee

Reduction in tuition fee

Accounts Officer Name:..... Signature..... Date.....

F. FOR ADMIN USE ONLY

	Tick as appropriate Date & initial your name.	
Original or certified Certificates/Statements of attainment(s) are attached, sighted and copies retained in the student file.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
'CT Granted' column above is completed?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
Where CT is not granted a written explanation has been provided.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
Has student been notified of the outcome?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
Has student accepted the agreed outcome?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
Student Enrolment records have been updated in the Student Management System	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
PRISMS updated to notify the change in course duration	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
Credit Transfer information updated in the Result Summary Sheet	<input type="checkbox"/> Yes <input type="checkbox"/> No	